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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

JUN 26 2017

JEFFREY P. ALLSTEADT, CLERK INTAKE 3

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		Anny and An
:	Write the name that is on your government-issued picture	Annette	N/A
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	Johnson-Hampton	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	All other names you	N/A	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		N/A	
		First name	First name
		Middle name	Middle name
		Last name	Last name
wilding the	A RESIDENT SERVICES SERVICES SERVICES AND A RESIDENT S		
3	Only the last 4 digits of		interestation in
•	your Social Security	xxx - xx - 8 7 2 2	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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	Inson Hampton le Name Last Name	Case number (# known)		
	About Debtor 1;	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.		
the last 8 years	Business name	Business name		
Include trade names and doing business as names				
	Business name	Business name		
	EIN	EIN		
	EIN	EIN		
5. Where you live		if Debtor 2 lives at a different address:		
	15122 Evers St			
	Number Street	Number Street		
	D. H.			
	Dolton IL 60419 City State ZIP Code	City State ZIP Code		
	Cook	Side Zili Gode		
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Same			
	Number Street	Number Street		
	P.O. Box	P.O. Box		
	City State ZIP Code	City State ZIP Code		
6. Why you are choosing	тельного положения выполняющих положения выполняющих выполнающих	check one:		
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	TO SECURE AND A SE			

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D	ebtor 1 Annette John: First Name Middle Na	son Ha	mptor Last Nam) e		Case number (#1	known)	
j	art 2: Tell the Court Abo	ut Your I	Bankru	ptcy Case				
7.	The chapter of the Bankruptcy Code you	Check of	one. (For	a brief description of e	each, see <i>Noti</i>	ce Required by 11	1 U.S.C. § 342(b) for Individuals Filing	
	are choosing to file	_	Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7					
	under		pter 11					
			pter 12					
			pter 13					
8.	How you will pay the fee	loca your subr with I ne App I rec By li less	I court freelf, you mitting you a pre-ped to pelication quest the aw, a juthan 15	for more details about may pay with cash your payment on you printed address. ay the fee in install for Individuals to Parat my fee be waived to do not be sold to the official possible.	ut how you not cashier's cour behalf, you ments. If you may required to, you worty line that	nay pay. Typical check, or money ur attorney may u choose this or Fee in Installme request this optwaive your fee, at applies to you	eck with the clerk's office in your ally, if you are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is in family size and you are unable to	
9.	Have you filed for bankruptcy within the last 8 years?	Cha ☑ No	pter 7 F	Filing Fee Waived (O	official Form	MM / DD / YYYY	nust fill out the Application to Have the with your petition. Case number	
			District	***************************************	When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy cases pending or being	☑ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					Relationship to you Case number, if known	
	wirings :		Debtor				Relationship to you	
							Case number, if known	
11.	Do you rent your residence?	☑ No.	Go to li	ur landlord obtained an			and do you want to stay in your	
			☐ Yes	Go to line 12. s. Fill out <i>Initial Stateme</i> bankruptcy petition.	ent About an E	Eviction Judgment	Against You (Form 101A) and file it with	

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	nnette John		Impton Last Name	PPARAMETER AND	Case number (if known)
Part 31 Rep	ort About Any I	Busines:	ses You Own as a S	ole Proprietor		
	sole proprietor or part-time		Go to Part 4.			
business?		Yes.	Name and location of b	ousiness		
individual, an separate lega a corporation	operate as an		Name of business, if any			
LLC. If you have m	ore than one		Number Street			
sole proprieto separate she	orship, use a et and attach it					
to this petition	1.		City		State	ZIP Code
			Check the appropriate	box to describe your	business:	
			☐ Health Care Busine	ess (as defined in 11	U.S.C. § 101(27A))	
			☐ Single Asset Real E	state (as defined in	11 U.S.C. § 101(51B))	
			☐ Stockbroker (as def	fined in 11 U.S.C. § 1	(01(53A))	
			☐ Commodity Broker	(as defined in 11 U.S	S.C. § 101(6))	
			☐ None of the above			
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small		most recany of the	appropriate deadlines. It ent balance sheet, state lese documents do not d I am not filing under Ch	f you indicate that you ement of operations, exist, follow the proce apter 11.	u are a small business cash-flow statement, a edure in 11 U.S.C. § 1	
business debi 11 U.S.C. § 1		₩ No.	I am filing under Chapte the Bankruptcy Code.	er 11, but I am NOT a	ı small business debto	r according to the definition in
		☐ Yes.	I am filing under Chapte Bankruptcy Code.	er 11 and I am a sma	Il business debtor acco	ording to the definition in the
art 4: Repo	ort if You Own o	or Have	Any Hazardous Prop	perty or Any Prop	erty That Needs I	mmediate Attention
. Do you own	or have any at poses or is	No No				
alleged to p	ose a threat	Tyes.	What is the hazard?			
of imminent identifiable public healt Or do you o	hazard to h or safety?			4-1		
	roperty that needs mmediate attention?		If immediate attention	is needed, why is it n	eeded?	
	ods, or livestock ed, or a building			**************************************		
			Where is the property?	Number Street	ət	
				City		State ZIP Code
				-		

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Debtor 1

Annette Johnson Hampton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	4	
ADOUL	Deptor		ī

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed,

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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D€	Annette John First Name Middle Nam	son Hampton Last Name	Case number (#	known)		
initialis						
P	art 6: Answer These Que	stions for Reporting Purpo	ses			
16	. What kind of debts do you have?	16a. Are your debts prima as "incurred by an individe	arily consumer debts? Consumer de ual primarily for a personal, family, or ho	ebts are defined in 11 U.S.C. § 101(8) pusehold purpose."		
	you nave:	No. Go to line 16b. Yes. Go to line 17.				
		16b. Are your debts prima money for a business or it	rily business debts? Business debi	ts are debts that you incurred to obtain ne business or investment.		
		□ No. Go to line 16c.□ Yes. Go to line 17.				
		16c. State the type of debts yo	ou owe that are not consumer debts or b	usiness debts.		
17.	Are you filing under Chapter 7?	No. I am not filing under C	Chapter 7. Go to line 18.	The second secon		
	Do you estimate that after any exempt property is	Yes. I am filing under Chap administrative expense	eter 7. Do you estimate that after any exc es are paid that funds will be available t	empt property is excluded and odistribute to unsecured creditors?		
	excluded and administrative expenses	☑ No				
0.244.750-	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes				
18.	How many creditors do you estimate that you	2 1-49	1,000-5,000	25,001-50,000		
perdenor	owe?	☐ 100-199 ☐ 200-999	☐ 5,001-10,000 ☐ 10,001-25,000	50,001-100,000 More than 100,000		
19.	How much do you estimate your assets to	\$0-\$50,000 \$50,001-\$100,000	\$1,000,001-\$10 million \$10,000,001-\$50 million	\$500,000,001-\$1 billion		
	be worth?	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$50 million \$100,000,001-\$500 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do you	30-\$50,000	□ \$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	estimate your liabilities to be?	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	☐ \$1,000,000,001-\$10 billion		
interior	George and the second s	\$100,001-\$500,000 \$500,001-\$1 million	□ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion □ More than \$50 billion		
) a	rt 7: Sign Below					
Fo	r you	I have examined this petition, and I declare under penalty of perjury that the information provided correct.				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone and read the notice required by 11 U.S.	who is not an attorney to help me fill out C. § 342(b).		
		I request relief in accordance wi	ith the chapter of title 11, United States	Code, specified in this petition.		
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
		Signature of Debtor 1	neon. Almyton x N/A Signatur	of Dobby 2		
			•	re of Debtor 2		
		Executed on 06/26/2017 MM / DD /)	Execute	d on		

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Debtor 1 Annette	e Johnson Middle Name	Hamptoi Last Nan		Case number (# known)			
For you if you are fi pankruptcy without attorney	an ed by	should un themselve conseque	nderstand that many people find it es successfully. Because bankrup inces, you are strongly urged to h	otcy has long-term financial and legal ire a qualified attorney.			
an attorney, you do need to file this pag		technical, a dismissed thearing, or firm if your	and a mistake or inaction may affect you because you did not file a required doc cooperate with the court, case trustee	dle your bankruptcy case. The rules are very our rights. For example, your case may be cument, pay a fee on time, attend a meeting or . U.S. trustee, bankruptcy administrator, or audit ens, you could lose your right to file another benefit of the automatic stay.			
		court. Even in your sche property or also deny y case, such cases are ra	if you plan to pay a particular debt ou edules. If you do not list a debt, the del properly claim it as exempt, you may rou a discharge of all your debts if you as destroying or hiding property, falsify	thedules that you are required to file with the tside of your bankruptcy, you must list that debt bt may not be discharged. If you do not list not be able to keep the property. The judge can do something dishonest in your bankruptcy ying records, or lying. Individual bankruptcy is have been accurate, truthful, and complete.			
		hired an atto successful, Bankruptcy	orney. The court will not treat you diffe you must be familiar with the United S	expects you to follow the rules as if you had rently because you are filing for yourself. To be states Bankruptcy Code, the Federal Rules of court in which your case is filed. You must also sly.			
		Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?					
		☐ No					
		Yes					
			are that bankruptcy fraud is a serious c or incomplete, you could be fined or im	crime and that if your bankruptcy forms are prisoned?			
		□ No	, ,,				
	j	Yes					
	į	Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No Yes. Name of Person					
		Atta	ch Bankruptcy Petition Preparer's Notice	p, Declaration, and Signature (Official Form 119).			
	ŀ	nave read ai	nere, I acknowledge that I understand t nd understood this notice, and I am aw y cause me to lose my rights or proper	he risks involved in filing without an attorney. I vare that filing a bankruptcy case without an rty if I do not properly handle the case.			
	×	And Signature of D	Debtor 1 Hary Harytin	N/A Signature of Debtor 2			
	C	Date	06/26/2017 MM/DD /YYYY	Date			
	C	Contact phone	(700) 000 0000	MM / DD / YYYY Contact phone			
		Cell phone	(708) 692-9008	Cell phone			
	E	Email address	netthamp95@gmail.com	Email address			

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Fill in this information to identify your case:						
Debtor 1	Annette Johr	nson Hampton				
	First Name	Middle Name	Last Name			
Debtor 2	N/A					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court f	for the: Northern District of Illinois		*		
Case number						
	(If known)		•			

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 12 Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$55,441.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$26,220.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$81,661.00
P	arti-2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$132,680.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ _{\$} 62,315.00

Your total liabilities

\$ ____194,995*.*00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	2.395.55
Copy your combined monthly income from line 12 of Schedule I	\$ 2,395.55

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Annette Johnson Hampton Debtor 1 Case number (if known) First Name Middle Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 2 Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 3,411.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 0.00 0.00 9g. Total. Add lines 9a through 9f.

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Fill in ti	his information to i	dentify your case and	his filing:		
Dobton	Annette Joh	nson Hampton			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2	N/A If filing) First Name		The state of the s		
	•	Middle Name	Last Name		
United S	tates Bankruptcy Court	for the: Northern District	of Illinois		
Case nui	mber	*·····································		ı	Check if this is an
					amended filing
	cial Form 10				
Sci	redule A	/B: Proper	ty		12/15
respon	ry where you think sible for supplying our name and case	it fits best. Be as com correct information. If number (if known). An	ms. List an asset only once. If an asset fits in more plete and accurate as possible. If two married peop more space is needed, attach a separate sheet to the swer every question. g, Land, or Other Real Estate You Own or Ha	le are filing together, b his form. On the top of	oth are equally
1 Dov					
	lo. Go to Part 2.	legal or equitable inte	rest in any residence, building, land, or similar prop	erty?	
	io. Go to Part 2. es. Where is the pro	norty?			
	es. Where is the pro	perty?	What is the property? Check all that apply.		
	45100 Europe O	ı.	Single-family home	Do not deduct secured of the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
1.1.	15122 Evers S	I lable, or other description	Duplex or multi-unit building	Creditors Who Have Cla	ims Secured by Property.
	Oreet address, il avai	iable, or other description	Condominium or cooperative	Current value of the	Current value of the
	(debtor's reside	ence)	Manufactured or mobile home	entire property?	portion you own?
	***************************************		— 🚨 Land	\$ 55,441.00	\$55,441.00
	Dolton	IL 60419	Investment property		_
	City	State ZIP Cod	Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check one.	fee simple	o oomtoj, ii miorrii.
	Cook		Debtor 1 only Debtor 2 only	***************************************	
	County		Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
			At least one of the debtors and another	(see instructions)	similarity property
			Other information you wish to add about this it	tem such as local	
			property identification number: 29-10-408-0	18-0000	
lf you	own or have more th	nan one, list here:			
			What is the property? Check all that apply.	Do not deduct secured cl	
1.2.			☐ Single-family home	the amount of any secure	ed claims on Schedule D:
1.2.	Street address, if avail	able, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ms Secured by Property.
			Condominium or cooperative	Current value of the	
			☐ Manufactured or mobile home ☐ Land	entire property?	portion you own?
			Investment property	\$	\$
	City	State ZIP Code	Timechere	Describe the nature of interest (such as fee	simple, tenancy by
			Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
			Debtor 1 only		
	Country		Debtor 2 only		
	County		Debtor 1 and Debtor 2 only	Check if this is co	
			At least one of the debtors and another	(see instructions)	mmunity property
				,	
			Other information you wish to add about this itel property identification number:	m, such as local	

Case 17-19162 Doc 1 Filed 06/26/17 Entered 06/26/17 12:13:19 Desc Main Document Page 11 of 62 Annette Johnson Hampton Debtor 1 Case number (# known) First Name Middle Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property City ☐ Timeshare Describe the nature of your ownership ZIP Code interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 55,441,00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Lincoln Who has an interest in the property? Check one. Make: 3.1. Do not deduct secured claims or exemptions. Put **MKS** the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 56240 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 12.444.00 12,444.00 Check if this is community property (see instructions)

Official Form 106A/B

3.2, Make:

Model:

Year:

Approximate mileage:

Other information:

If you own or have more than one, describe here:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

Debtor 1 only

Debtor 2 only

instructions)

Who has an interest in the property? Check one.

Current value of the

portion you own?

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:

Creditors Who Have Claims Secured by Property.

Current value of the

entire property?

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Debtor 1	Annette Johnson Hampton	Document Page 12 of 62 Case number (#	(former or)	
	First Name Middle Name Last Nan	ne Case (Idinoe) (#	кложп)	
2.2	Make:	Who has an interest in the property? Check one.		
3.3.		Debtor 1 only	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:		_	
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year:	Debtor 2 only		医克克克氏 化二氯甲基基 电电流
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another		, ,
	and anomalous.	☐ Check if this is community property (see instructions)	\$	\$
Exam	ples: Boats, trailers, motors, personal waterc	ner recreational vehicles, other vehicles, and acces raft, fishing vessels, snowmobiles, motorcycle accesso		
☐ Y€	9 8			
	Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D.
	Other information:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Otto mornago,	At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$	\$
lf you	own or have more than one, list here:			
	Make:	Who has an interest in the property? Check one.	Do not deduct secured clai	ms or exemptions. Put
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	claims on Schedule D:
	V	Debtor 2 only	2.28.38.3.22.2.2	
	rear.	Debtor 1 and Debtor 2 only	Current value of the	Current value of the

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

instructions)

12,444.00

portion you own?

entire property?

Other information:

4.

At least one of the debtors and another

Check if this is community property (see

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Debtor 1

Part 3:

Annette Johnson Hampton

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Case number (if known)

Describe Your Personal and Household Items Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe....... beds, dressers, washer, dryer, microwave, refrigerator, tables, chairs, linen, iron 1,750.00 clocks, wall pictures, dishes, small appliances, lamps, sectional, sofa, used valu 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe......tv's dvd players, cell phone, printer, home computer all items at pawn shop 445.00 value 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe.......bible, books, family pictures(no cash value) at used book store prices 40.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments 2 No Yes. Describe...... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ No Yes. Describe...... 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes, Describe...... normal wearing apparel at used store value 603.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirfoom jewelry, watches, gems, gold, silver ☐ No Yes. Describe.....costume jewelry at flea market value used 220.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ☑ No ☐ Yes. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ No Yes. Give specific 325.00 lawn furniture, grill, snow blower, refrig, sectional items valued at flea mrkt price 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 3,383.00 for Part 3. Write that number here

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Debtor 1

Annette Johnson Hampton Middle Name

Lasi Name

Case number (if known)_

Part 4: **Describe Your Financial Assets** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No ☑ Yes..... 68.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ☑ Yes..... Institution name: Chase Bank #1225 17.1. Checking account: 90.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **2** No ☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No	Name of entity:	% of owne	rship:
 Yes. Give specific information about		0%	%
them		0%	%
		0%	%

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Debtor 1

Annette Johnson Hampton Middle Name

Document

Last Name

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Negotiable instruments Non-negotiable instrum	include personal ch nents are those you o	ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
No Yes. Give specific information about them	Issuer name:		¢
			Φ
			\$ \$
Retirement or pension Examples: Interests in I		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar plar	n:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		
	Additional account:		\$
	prepayments	made so that you may continue service or use from a company	\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have	made so that you may continue service or use from a company	\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have with landlords, prepa	made so that you may continue service or use from a company	\$
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have with landlords, prepa	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have with landlords, prepa	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$
Your share of all unused Examples: Agreements companies, or others No	prepayments I deposits you have with landlords, prepare li Electric: Gas: Heating oil:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have with landlords, prepail li Electric: Gas: Heating oil: Security deposit on re	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$\$ \$
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have with landlords, preparation li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have with landlords, prepail Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications astitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No	prepayments d deposits you have with landlords, prepail Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications estitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have with landlords, prepayments li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: of money to you, either for life or for a number of years) scription:	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$
Examples: Agreements companies, or others No Yes	prepayments d deposits you have with landlords, prepayments li Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: ental unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$

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Case number (if known)

Case number (if known)

Ø No	(b)(1), 529A(b), and 52	1 61 6		
☐ Yes	Institution	n name and description. Separately file the records of any	imbanasta 44 U O O O C	** >
	mautauo	Thane and description, Separately life the records of any	interests.11 U.S.C. § 52	1(c):
	And the second section of the section o			\$
	***************************************			- \$
i. Trusts, equitable exercisable for y	or future interests in our benefit	property (other than anything listed in line 1), and righ	its or powers	
☑ No				
Yes. Give spe	cific			mem etc.
information ab	out them			\$
. Patents, copyrigi Examples: Interne	hts, trademarks, trade	secrets, and other intellectual property ites, proceeds from royalties and licensing agreements		
☑ No	A COMON HUMBS, Webs	nes, proceeds from royanies and licensing agreements		
Yes. Give spe	cific			1 Martin Contracting
information ab	out them			\$
	:			
	ises, and other genera			
	g permits, exclusive lice	enses, cooperative association holdings, liquor licenses, pr	ofessional licenses	
☑ No	, 1997			
Yes. Give sperinformation ab				\$
				V
oney or property o	wed to you?			المعاصلة والمحاورة والأراج والمراوع
		"我们是我们的我们,我们就是我们的我们的,我们就是我们的,我们就是我们的我们的,我们就是我们的,我们就会不会不知识。"		Command tradition of the
				Current value of th portion you own?
				The state of the s
.Tax refunds owed	I to you			portion you own? Do not deduct secured
.Tax refunds owed	l to you			portion you own? Do not deduct secured
☐ No ☐ Yes. Give spec	cific information	2016 tax refund (EIC) exempt amount		portion you own? Do not deduct secured claims or exemptions.
No Yes. Give speciabout the	cific information m, including whether	2016 tax refund (EIC) exempt amount	Federal:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00
No Yes. Give spec about the you already	cific information	2016 tax refund (EIC) exempt amount	State:	portion you own? Do not deduct secured claims or exemptions.
No Yes. Give spec about the you already	cific information m, including whether dy filed the returns	2016 tax refund (EIC) exempt amount		portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00
No Ves. Give spect about the you alread and the tax	cific information m, including whether dy filed the returns	2016 tax refund (EIC) exempt amount	State:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00
No Ves. Give spect about the you alread and the tall. Family support	cific information m, including whether dy filed the returns ux years		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you alread and the taread and the taread and the taread specific	cific information m, including whether dy filed the returns ux years	2016 tax refund (EIC) exempt amount , spousal support, child support, maintenance, divorce sett	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you aireat and the tareatter and the tareatter Examples: Past due No	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you aireat and the tareatter and the tareatter Examples: Past due No	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you aireat and the tareat and the tareat support Examples: Past due No	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local: lement, property settlement.	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$ ent \$
No Yes. Give spect about the you aireat and the tall. Family support Examples: Past due.	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local: lement, property settlement, propert	portion you own? Do not deduct secured claims or exemptions. \$
Yes. Give spec about the you alread and the tax. Family support Examples: Past du	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local: fement, property settlem Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$
No Yes. Give spect about the you aireat and the tall. Family support Examples: Past due.	cific information m, including whether dy filed the returns ux years	, spousal support, child support, maintenance, divorce sett	State: Local: fement, property settlem: Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$
No Yes. Give spect about the you alread and the tall. Family support Examples: Past du No Yes. Give spect	cific information m, including whether dy filed the returns ex years	, spousal support, child support, maintenance, divorce sett	State: Local: Iement, property settlement, property settlement. Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you alread and the tall the your alread and the tall the second	cific information m, including whether dy filed the returns ix years e or lump sum alimony cific information	spousal support, child support, maintenance, divorce sett	State: Local: Iement, property settlement, property settlement. Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you alread and the taread and	cific information m, including whether dy filed the returns ix years e or lump sum alimony cific information	, spousal support, child support, maintenance, divorce sett	State: Local: Iement, property settlement, property settlement. Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$
No Yes. Give spect about the you alread and the tax. Family support Examples: Past du No Yes. Give spect Other amounts so Examples: Unpaid Social S	cific information m, including whether dy filed the returns ix years e or lump sum alimony dific information meone owes you wages, disability insura Security benefits; unpai	spousal support, child support, maintenance, divorce sett	State: Local: Ilement, property settlement, property settlement: Maintenance: Support: Divorce settlement: Property settlement: workers' compensation,	portion you own? Do not deduct secured claims or exemptions. \$ 3,040.00 \$

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Annette Johnson Hampton Debtor 1 Last Name

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Case number (f known)

31. Interests in insurance policies			
Examples: Health, disability, or life insura	nce; health savings account (HSA)); credit, homeowner's, or renter's insurance	
☑ No			
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
			\$
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, oproperty because someone has died. No	expect proceeds from a life insurar	nce policy, or are currently entitled to receive	
Yes. Give specific information	$100 \neq \sigma_0 + 200 $		
	•		\$
22 Claima against thind and in suboth an artist suboth as			article from T
33. Claims against third parties, whether of Examples: Accidents, employment dispute	es, insurance claims, or rights to so	made a demand for payment ue	
No			,
Yes. Describe each claim,			\$
34. Other contingent and unliquidated claim			
to set off claims	no or overy materie, melacing con	unterclaims of the deptor and rights	
No	ing thirty and with an instrument to the stage had project by making a memory and a stage of the distributions.		
Yes. Describe each claim			
:			\$
35. Any financial assets you did not already	/ list		
☑ No	en magazione per soluti de mode de informació en en en manga espete por desarre de mes ano manente en mangaz programa de men		
Yes. Give specific information			
:	4, production and communication groups of product and annual contract and annual groups (successive		***************************************
36. Add the dollar value of all of your entrie	s from Part 4. including any ent	ries for pages you have attached	
for Part 4. Write that number here		→ · · · · · · · · · · · · · · · · · · ·	\$10,393.00
Part 5: Describe Any Business-	Related Property You Ou	n or Have an Interest In. List any r	aal aatata in Daat d
	action i toporty i ou ou	in or mave an interest in. List any i	eai estate in Part 1.
37. Do you own or have any legal or equitab	ole interest in any business-relat	ed property?	
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the
			portion you own?
	•		Do not deduct secured claims or exemptions.
36. Accounts receivable or commissions yo	u already earned		
No	•		
☐ Yes. Describe			
			\$
39. Office equipment, furnishings, and supp	dies		
		nes, rugs, telephones, desks, chairs, electronic devices	
☑ No		,	
☐ Yes. Describe			P
			\$

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Last Name

40. Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade		
Yes. Describe			e nyemp _e ns.
1			\$
41.Inventory			
Yes. Describe			\$
` <u>.</u>			
12. Interests in partnersh	ps or joint ventures		
₩ No			
Yes. Describe	Name of entity: % of ov	vnership;	
		%	\$
		%	\$
		%	\$
3. Customer lists, mailin	g lists, or other compilations		
☑ No			
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
☐ No ☐ Yes. Desc	Sho		·····1
WE TES. DESCI			\$
4. Any business-related ∣ ✓ No	property you did not already list		
Yes. Give specific			
information			\$
			\$
			\$
			\$
		WARRANT TO A STATE OF THE STATE	\$
			\$
5. Add the dollar value o	f all of your entries from Part 5, including any entries for pages you have attached		0.00
for Part 5. Write that n	umber here	→	\$0.00
_			
art 6: Describe An	y Farm- and Commercial Fishing-Related Property You Own or Have an In have an interest in farmland, list it in Part 1.	terest In	la.
<u> </u>			
6. Do you own or have an	y legal or equitable interest in any farm- or commercial fishing-related property?		
No. Go to Part 7. Yes, Go to line 47.			:
res. Go to mie 47.			ing the same of the same
			Current value of the portion you own?
			Do not deduct secured claims
7. Farm animals			or exemptions.
Examples: Livestock, po	ultry, farm-raised fish		
☑ No			
☐ Yes			
4			•

Case 17-19162 Doc 1 Filed 06/26/17 Entered 06/26/17 12:13:19 Desc Main Document Page 19 of 62 Annette Johnson Hampton Debtor 1 Case number (if known)_ Middle Name Last Name 48. Crops-either growing or harvested 2 No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **Q** Yes..... 50. Farm and fishing supplies, chemicals, and feed ☑ No **Q** Yes..... 51. Any farm- and commercial fishing-related property you did not already list 2 No Yes. Give specific information..... \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ✓ No Yes. Give specific information..... 0.00 Part 8: List the Totals of Each Part of this Form 55,441.00 55. Part 1: Total real estate, line 2 12,444.00 56. Part 2: Total vehicles, line 5 3,383.00 57. Part 3: Total personal and household items, line 15 10,393.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 26,220.00 Copy personal property total → +\$ 62. Total personal property. Add lines 56 through 61. 26,220.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

81,661.00

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Fill in th	is information to identil	fy your case:			
Debtor 1	Annette Johnson	n Hampton			
Debtor 2	First Name N/A	Middle Name	Last Name		
(Spouse, if	filing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	e:Northern Distric	et of Illinois		
Case num (if known)	ber				Check if this is an amended filing
Officia	I Form 106C				
Sche	edule C: Ti	ne Prop	erty You	Claim as Exempt	04/16
Using the p space is ne	property you listed on Sci	<i>hedule A/B: Prop</i> to this page as n	erty (Official Form 106A	gether, both are equally responsible for supplying the property that you claditional Page as necessary. On the top of any	aim as exempt. If more

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	You C	laim as	Exempt	

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

	You are cla	iming federal exemptions. 11 U	.S.C. § 522(b)(2)	0.010. 3 0.22(0)(0)	
2.				nt, fill in the information below.	
	Brief descripti	on of the property and line on that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description:	15122 Evers Dolton I	\$ <u>55,441.00</u>	☑ \$ 15,000.00	735-5/12-901
	Line from Schedule A/B:	1.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	2013 Lincoln MKS	\$ <u>12,444.00</u>	≥ \$ 2,400.00	735-5/12-1001(c)
	Line from Schedule A/B:	3.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	household goods	\$ <u>1,750.00</u>	\$ 1,750.00	735-5/12-1001(b)
	Line from Schedule A/B:	.6		100% of fair market value, up to any applicable statutory limit	
3.		ng a homestead exemption of strnent on 4/01/19 and every 3 y		filed on or after the date of adjustment.)	
		acquire the property covered b	by the exemption within 1	,215 days before you filed this case?	

Document

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Debtor 1

Annette Johnson Hampton

First Name Middle Name

Case number (if known)_

Additional Page

Brief descrip on Schedule	tion of the property and line A/B that lists this property	A CONTRACTOR OF THE PARTY OF TH	t value of the you own	Amount	of the exemption you claim	Specific laws that allow exemption
		Copy th	ne value from lile A/B	Check or	ly one box for each exemption	
Brief description:	electronics	\$	445.00	□ \$	445.00	735-5/12-1001(b)
Line from Schedule A/B:	, 7				of fair market value, up to applicable statutory limit	
Brief description:	bible, books	\$	40.00	- \$	40.00	735-5/12-1001(b)
Line from Schedule A/B:	. 8			any a	of fair market value, up to applicable statutory limit	
Brief description:	clothes	\$	603.00	□ \$	603.00	735-5/12-1001(a)
Line from Schedule A/B:	11				of fair market value, up to pplicable statutory limit	
Brief description:	costume jewelry	\$	220.00	□ \$	220.00 of fair market value, up to	735-5/12-1001(b)
Line from Schedule A/B;	16				pplicable statutory limit	
Brief description: Line from	other personal prop	\$	325.00	☐ \$	325.00 of fair market value, up to	735-5/12-1001(b)
Schedule A/B:	14				pplicable statutory limit	
Brief description:	cash in wallet	\$	68.00	_ \$	68.00	735-5/12-1001(b)
Line from Schedule A/B:	16				of fair market value, up to oplicable statutory limit	
Brief description:	Chase bank #1225	\$	90.00	_ \$	90.00	735-5/12-1001(b)
Line from Schedule A/B:	<u>17.1</u>				of fair market value, up to oplicable statutory limit	
Brief description:	2016 tax refund	\$	3,040.00	— v —	J,040.00	735-5/12-1001(g)(1) 735-5/12-1001(b)
Line from Schedule A/B:	28			any a ₁	of fair market value, up to pplicable statutory limit	
Brief description:	workers comp.	\$	7,195.00	- \$	7,195.00	820-310/21
Line from Schedule A/B:	30				of fair market value, up to plicable statutory limit	
Brief description:		\$		- \$		
Line from Schedule A/B:				100% any ar	of fair market value, up to plicable statutory limit	
Brief description:	· · · · · · · · · · · · · · · · · · ·	\$		- s		
Line from Schedule A/B:					of fair market value, up to plicable statutory limit	
Brief description:	1 10 10 10 10 10 10 10 10 10 10 10 10 10	\$	1	- \$		
Line from Schedule A/B:					of fair market value, up to plicable statutory limit	

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Creditor's Name 17350 Torrence Ave Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 6 6 7 9	Fill in this information to identify your ca	Se:			
Debtor 2 N/A Notes than 1907 to 1909 the Northern District of Bingles 1907 the Northern Bingles 1907 the Norther	Pohter 4 Annette Johnson Hampte	on			
Check if this is an amended filing Check if this is an amended filing					
United States Berinuptey Court for the: Northern District of Illinois Clase number of concern Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as presible, if two married people are filing tegether, both are equally responsible for supplying correct additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. Do any creditors have claims secured by your property? 1. List all Secured Claims. If a creditor has more than one secured claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. If more than one creditor has a particular claim, list the creditor separately for cach claim. 2. List all secured Claims. 3. Column B. 3. Column B. 4. Column B. 4. Column B. 5. Column B. 6. Col	DCDIOI Z	Name Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any settlifician lapser, with your men and case number (if knewn). 1. Do any creditors have claims secured by your property? 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Amount of claim Value of contracting the cash dain. If more than one creditor has a particular claim, list the creditor in Part 2. Amount of claim Value of collaboration in Part 2. Amount of claim Value of					
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Debtor 1

Annette Joi	nnson Han	npton	Ones as subs	
First Name	Middle Name	Last Name	Case number (if known)	

Part 2: List Others to Be N	Sometimes of the second second		
agency is training to collect Itotil Anti-	any of the debts tha	o someone else, list it vou listed in Part 1	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
1 Manley Deas Kochalski, L			On which line in Part 1 did you enter the creditor? 2.1
Name			Last 4 digits of account number 7 2 3 4
P O Box 165028			Last 4 digits of account frammer 1 2 0 4
Number Street			and the second s
Columbus	ОН	43216	
City	State	ZIP Code	
Manley Deas Kochalski, L	LC	holder i die der erkentsperied in de ver ver de kriefpelijkelyngen, meg gewy. Ny	On which line in Part 1 did you enter the creditor? 2.1
Name 1555 Lake Shore Dr			Last 4 digits of account number 7 2 3 4
Number Street			
Calvashua			
Columbus City	OH	43204	
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Number Street			·
City	State	ZIP Code	
and the second s	e Sant Legis (1974), et a respective sa sustanti en	erderlandes wije et redant westentraleriste bestellendeliche et	On which the in Power did not recover the control of the control o
Name			On which line in Part 1 did you enter the creditor? Last 4 digits of account number 9 6 2 8
			Last 4 digits of account fidinger
Number Street			ne.
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Name	***		Last 4 digits of account number
Number Street			
The state of the s			-
City	State	ZIP Code	
			On which line in Part 1 did you enter the creditor?
Name			Last 4 digits of account number
Number Street			-
			-

ZIP Code

State

Case 17-19162 Doc 1 Filed 06/26/17 Entered 06/26/17 12:13:19 Desc Main Page 24 of 62 Document Fill in this information to identify your case: Annette Johnson Hampton Debtor 1 N/A Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ☐ No Other, Specify ☐ Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated ZIP Code ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify

No Yes

Part 2:

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First Name Middle Name Last Name Last

List All of Your NONPRIORITY	Unsecured Claims
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3.	Do any creditors have nonpriority una No. You have nothing to report in thi Yes	s part. Sut	omit this form to th	ne court with your other schedules.		
1.3	List all of your nonpriority unsecured nonpriority unsecured claim, list the cred	claims in litor separa litor holds :	the alphabetical ately for each claim a particular claim	order of the creditor who holds each claim. If a creditor ham not not claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three not	s more the	an one
	1				Total o	:laim
4.1	ADT, LLC dba ADT Security Se	ervices		Last 4 digits of account number 4 5 9 1	100000000000000000000000000000000000000	
	Nonpriority Creditor's Name			When was the debt incurred?	\$	41.00
	1501 Yamato Rd Number Street			which was the dept incurred?		
	Boca Raton	FL	33431			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a commun			Student loans Obligations arising out of a separation agreement or divorce		:
		ity debt		that you did not report as priority claims		\$ 5
	Is the claim subject to offset? 2 No			Debts to pension or profit-sharing plans, and other similar debts		
	Yes			Other Specify credit use		:
$\overline{}$	a producers respectively and appropriately constructive transfer extensive transfer extensive transfer extensive and the construction of the const		rich Cherch does Grow has word a southern question (1945-195) est		htt van Norden en e	senseste operational and returnish ma-
.2	Advocate Medical Group Nonpriority Creditor's Name			Last 4 digits of account number 4 8 4 0	\$	40.00
	701 Lee St			When was the debt incurred?		
	Number Street					
		IL	60016	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			T. (NOURRIGHT)		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a communi	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	☑ No			Other. Specify medical		
	Yes **Mark of the Control of t	oniteaesan keessaka parawa Nose	no distributo o torres o constituto de la sistema de la segui de distributo de la segui de la segui de la segui		-drond Philadelike Dividing web and	**************************************
3	Advocate Medical Group			Last 4 digits of account number 4 8 4 0		720.00
	Nonpriority Creditor's Name			When was the debt incurred? 02/23/2017	\$	736.00
	8550 W Byrn Mawr Ave 8th Floo	or				
		IL.	60631			
		State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent		
	Debtor 1 only			Unliquidated		
	Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a communi	ty debt		Obligations arising out of a separation agreement or divorce		:
	Is the claim subject to offset?			that you did not report as priority claims		
	M No			Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical		
	☐ Yes					

Last Name

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Part 2:

Afi	er listing any entries on this page,	number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
4	Alcoa Billing Center			Last 4 digits of account number 8 0 3 1	s 460.00
	Nonpriority Creditor's Name 3429 Regal Dr			When was the debt incurred? 08/05/2014	T
	Number Street Alcoa	TNI	27704	As of the date you file, the claim is: Check all that apply.	
	City	TN	37701 ZIP Code		
	•	0.0.0	2.17 0000	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			•	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anoth	or		Student loans	
	☐ Check if this claim is for a comm			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	.aimy acbt		Debts to pension or profit-sharing plans, and other similar debts	
	No			Other. Specify medical	
	Yes				
5	America's Financial Choice	TEAN ON THE STAN FROM THE POOR PROPERTY AND	ત્રી નહીં મેં મેં જે અને અંગોળવાં અહીં, વાદા અંગોળવાં પ્રદેશ અને ત્રાપ્યું અને પ્રદેશના હતી.	Last 4 digits of account number 4 7 3 3	\$ 1,300.00
	Nonpriority Creditor's Name				-
	1107 E Sibley Blvd			When was the debt incurred?	
	Number Street Dolton	IL	60419	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			_	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	er		Student loans	:
				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify credit use	
	☑ No ☐ Yes				
6	A TO T. I. I	Corp. I an Charles Andrews (Corp. 1 and Corp. 1 and Co	en kriste kilosi kristisia kriste kristeren ereken ereken ereken isilik kriste kollektri ereken ereken ereken Ereken kriste kristisia kriste kristeren ereken ereken ereken ereken isilik kriste kristeria ereken ereken er		\$ <u>183.00</u>
	AT&T Uverse Nonpriority Creditor's Name			Last 4 digits of account number 4 9 0 3	-
	P O Box 5014			When was the debt incurred?	
	Number Street Carol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and anothe	r		Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	unity debt		you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	☑ No Yes			Other. Specify Credit use	

Document

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Annette Johnson Hampton

Stroot S	Bankfinancial Corp Nonpriority Creditor's Name			Last 4 digits of account number 8 7 7 0	_{\$68}
Burr Ridge L 60527 Sinis ZP Code Contingent Unfiquidated Disputed	15W060 North Frontag	e Road		When was the debt incurred?	
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Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 3 only Student loans Debts 3 persist or profile stating plans, and other similar debts Debts 5 persist or profile stating plans, and other similar debts Debts 6 persist or profile stating plans, and other similar debts Debts 6 persist or profile stating plans, and other similar debts Debts 6 persist or profile stating plans, and other similar debts Debts 6 persist or profile stating plans, and other similar debts Debts 6 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 persist or profile stating plans, and other similar debts Debts 7 and Debtor 2 only Debts 7 and Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist or profile stating plans, and other similar debts Debts 8 persist Debts 8	Who incurred the debt? Chec		ZIP Code	☐ Unliquidated	·
Check if this claim is for a community debt				Type of NONDRIORITY unsecured deim	
Check if this claim is for a community debt Is the claim subject to offset? If No Yes Chex Systems Chex It digits of account number 8 7 2 2 2 \$	Debtor 1 and Debtor 2 only				
Check if this claim is for a community debt is the claim subject to offset? ChexSystems	At least one of the debtors ar	nd another			
ChexSystems Last 4 digits of account number 8 7 2 2 \$	Check if this claim is for	a community debt		you did not report as priority claims	
ChexSystems Nonpriority Creditor's Name 7805 Hudson Rd Ste 100 Number Streat Whon was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZP Code Obtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Obey State Nonpriority Creditor's Name P O Box 182125 Nonpriority Creditor's Name P O Box 18210 Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt control in the case of the debtor and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is	Is the claim subject to offset	?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit USe	
When was the debt incurred?					
When was the debt incurred?		kertili etik-etik dametak albumpya etik tililik hanpapya fanusik-arabeat		l ast 4 digits of account number 8 7 2 2	\$
As of the date you file, the claim is: Check all that apply.				Lust 4 digits of account flurings	\$
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□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Comenity Bank/ Carson's Nonprority Creditor's Name P O Box 182125 Number Street Columbus OH 43218 City State ZIP Code □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 2 only □ Check if this claim is for a community debt □ Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt		Cone.		☐ Disputed	
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Other. Specify No Yes Comenity Bank/ Carson's Comenity Bank/ Carson's Comenity Bank/ Carson's Last 4 digits of account number 0 9 2 1 When was the debt incurred? 12/29/1988 When was the debt incurred? 12/29/1988 As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Contingent Student loans Debtor 3 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Check if this claim is for a	community debt		you did not report as priority claims	
☐ No ☐ Yes Comenity Bank/ Carson's Comenity Bank/ Carson's Comenity Bank/ Carson's Last 4 digits of account number	s the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other Specify Notice Only	
Comenity Bank/ Carson's Nonpriority Creditor's Name P O Box 182125 Number Street Columbus OH 43218 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Last 4 digits of account number 0 9 2 1 \$11,5 When was the debt incurred? 12/29/1988 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	· ·			2 Onlo. opcony 2000 Shirty	
Comenity Bank/ Carson's Nonpriority Creditor's Name P O Box 182125 Number Street Columbus OH 43218 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Last 4 digits of account number U 9 2 1 When was the debt incurred? 12/29/1988 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Yes				
Nonpriority Creditor's Name P O Box 182125 Number Street Columbus OH 43218 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? 12/29/1988 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Comenity Bank/ Carson	eviennessenseenseenseenseenseenseenseensee	ide Andrews (Announcide A. Bellier I. H. Bellier A. L. Bellier A. L. Bellier A. L. Bellier Bel	Last 4 digits of account number $0.92.1$	\$ <u>11,974</u>
Number Street Columbus OH 43218 As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Nonpriority Creditor's Name				
Columbus OH 43218 As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		······································		When was the debt incurred?	
City State ZIP Code Contingent Unliquidated Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		ОН	43218	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims				Contingent	
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Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		. Gre.		☐ Disputed	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Check if this claim is for a community debt ☐ Check if this claim is for a community debt ☐ Check if this claim is for a community debt				Type of NONPRIORITY upsecured claim:	
☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Debtor 1 and Debtor 2 only				
Check if this claim is for a community debt you did not report as priority claims	At least one of the debtors and	l another			
Debts to pension or profit-sharing plans, and other similar debts	Check if this claim is for a	community debt		you did not report as priority claims	
is the claim subject to offset? Other. Specify Credit use		•			

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	er listing any entries on this page, n			.4, followed by 4.5, and so forth.					Total claim
10	Comenity Bank/ Express			Last 4 digits of account number	9	4	8	4	s 1,100.00
	Nonpriority Creditor's Name P O Box 182125			When was the debt incurred?	10/1	3/1	995	5	
	Number Street Columbus	ОН	43218	As of the date you file, the claim	is: C	neck	all th	at apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐					
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commu			Type of NONPRIORITY unsecur Student loans Obligations arising out of a separ you did not report as priority clair	ation a		emen	t or divorce that	; ;
	Is the claim subject to offset? No Yes	inty debt		Debts to pension or profit-sharing Other. Specify Credit use		i, ani	d othe	er similar debts	
11	Comenity Bank/ NWYRK& Co	i Villangia P, Kalleywik, Angelika a Karillina An	na may af a agus ag sa gairtíg ag	Last 4 digits of account number	6	9	6_	9	<u>\$ 1,033.00</u>
	P O Box 182125			When was the debt incurred?	06/0	9/2	009		
	Number Street Columbus	ОН	43218	As of the date you file, the claim	is: Ch	eck	all tha	at apply.	
	City	State	ZIP Code	☐ Contingent ☐ Unliquidated					
	Who incurred the debt? Check one.			Disputed					
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecure	ed cla	im:			
	Debtor 1 and Debtor 2 only			☐ Student loans	Ja Ola	1613.			
	At least one of the debtors and anotherCheck if this claim is for a commu			Obligations arising out of a separation you did not report as priority claim	ation a	gree	ment	or divorce that	
	is the claim subject to offset?	nity debt		Debts to pension or profit-sharing Other. Specify Credit use	plans,	and	othe	r similar debts	:
		e (Seelille de Josef, grown, or 11 registers y driven stance)	ભાગમાં તો આપ્યું કર્યા કહ્યું કરે કહ્યું કરે છે. આ માને આપ્યું કરે કર્યા કરે કહ્યું કરે છે. આ માને આ માને આ મા આ માને આ માન		di namana namanan na	ar ar			
12	Comenity Bank/ VCTSSEC			Last 4 digits of account number	3	8	7	3	s 6,651.00
	Nonpriority Creditor's Name P O Box 182125			•)6/18			one of the second secon	
	Number Street Columbus	ОН	43218	As of the date you file, the claim i	s: Che	eck a	ill tha	t apply.	
	City	State	ZIP Code	Contingent Unliquidated					
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed					
	Debtor 1 only Debtor 2 only			•	al at-!				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecure	u cidi	11.			
	At least one of the debtors and another			Student loansObligations arising out of a separa	tion ag	greer	nent	or divorce that	-
	Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing	5				
I	Is the claim subject to offset? No Yes			Other. Specify Credit use					

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Aft	er listing any entries on this page, number t	hem beginning with	4.4, followed by 4.5, and so forth.	Total claim
13	Comenity Capital/ HSN		Last 4 digits of account number 3 2 8 6	s 1,420.00
	Nonpriority Creditor's Name P O Box 182120		When was the debt incurred? 12/11/2010	Ψ
	Number Street Columbus OH	43218	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another Check if this claim is for a community deb	ŧ	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	•	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u> 	
	₩ No □ Yes			
14	Dell Financial Services/ Webbank	ndirenovemendare wezanoù e sardar y solo famila et forenou e estama e a ar esta esvañ	Last 4 digits of account number 3 8 9 1	\$ 484.00
	Nonpriority Creditor's Name		When was the debt incurred? 02/22/2004	\$
	P O Box 81607 Number Street		As of the date you file, the claim is: Check all that apply.	
	Austin TX City State	78708 ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans	:
	Check if this claim is for a community debi	:	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use	
	☑ No □ Yes			
15	on the American Associated a Security continuous company was make the Continuous and the American American Association and the American Association Association (Association) and the American Association (Association) and the Association	**************************************		\$ 3,509.00
	DSNB/ MACYS Nonpriority Creditor's Name		Last 4 digits of account number 2 8 6 0	
	P O Box 8218 Number Street		When was the debt incurred? 07/26/2014	
	Mason OH City State	45050 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	•	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		☐ Student loans	
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☑ No ☐ Yes		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit use	

Part 2:

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	er listing any entries on this page, n	umber th	em beginning with	h 4.4, followed by 4.5, and so forth.	Total claim
16	Equifax			Last 4 digits of account number 8 7 2 2	s 0.0
	Nonpriority Creditor's Name P O Box 740241			When was the debt incurred?	3
	Number Street Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe	r		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a commuls the claim subject to offset? ✓ No ☐ Yes			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify notice only 	
17	етический политический пересоргания политический политиче	ton india volumento esto, escrito de tombre de la compresión de la compresión de la compresión de la compresión	q militari ini destini katika katika katika eta eta eta eta eta eta eta eta eta et	Last 4 digits of account number $\frac{8}{}$ $\frac{7}{}$ $\frac{2}{}$ $\frac{2}{}$	\$
	Nonpriority Creditor's Name P O Box 2002			When was the debt incurred?	
	Number Street Allen	TX	75013	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>notice only</u> 	
8	Franciscan Alliance	www.communication	ter from Errock-Lamping of the Constantion of the United States (1981), the Conference of the Conferen	Last 4 digits of account number 7 1 6 2	\$ 121.00
	Nonpriority Creditor's Name 28044 Network Place			When was the debt incurred? 09/26/2015	
	Number Street Chicago	IL	60673	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and anotherCheck if this claim is for a communication			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? No Yes			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify medical ☐	

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First Name Middle Name Last Name Last Name

	er listing any entries on this page, nu		the state of the state of the state of	4.4, followed by 4.5, and so forth.					Total claim
19	Ingalls Memorial Hospital			Last 4 digits of account number	. 1	6_	8_	2	\$ 1,596.00
	Nonpriority Creditor's Name P O Box 3397			When was the debt incurred?	08/0)5/2	2014	<u>.</u>	
	Number Street Chicago	IL.	60654	As of the date you file, the claim	is: C	heck	all th	at apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed					
	Debtor 2 only			Type of NONPRIORITY unsecur	red cl	aim:			
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loansObligations arising out of a separation	4!			. B. a.	:
	☐ Check if this claim is for a community the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority clair Debts to pension or profit-sharing Other. Specify medical	ms				
20	Kohls Dept Store/ Capital One	merillinineeremens, jerges, jerg	erialiseriamisessimminerisimminessi erialismini, emmani astantusuumi	Last 4 digits of account number	7	2	6	6	s 3,660.00
	Nonpriority Creditor's Name	· · · · · · · · · · · · · · · · · · ·			05/0				·
	P O Box 3115 Number Street							•	
	Milwaukee	WI State	53201 ZIP Code	As of the date you file, the claim Contingent	is: Cl	neck .	ali tha	at apply.	
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Obligations arising out of a separa	ation a		ement	or divorce that	
	☐ Check if this claim is for a community the claim subject to offset? ☑ No ☐ Yes	ity debt		you did not report as priority claim Debts to pension or profit-sharing Other. Specify Credit use	ns				
	MacNeal Health Network Nonpriority Creditor's Name	PPALITIFY COMPAY A VOLATION SATERATES, SEQUENCE, PP.	TO COMPANY AND	Last 4 digits of account number	7	4	9	rom ventralisteria eta esta en esta esta esta esta esta esta esta esta	\$150.00
	P O Box 830913	*		When was the debt incurred?					
	Birmingham	AL	35283	As of the date you file, the claim i	is: Ch	eck a	ell that	t apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecure Student loans Obligations arising out of a separa			ma-+	an diverse the co	
	Check if this claim is for a communi	ity debt		you did not report as priority claim	s				
	ls the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing Other. Specify medical	plans,	and	other	similar debts	· · · · · · · · · · · · · · · · · · ·

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Debtor 1

Annette Johnson Hampton

Part 2:

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	·		Last 4 digits of account number 0 0 0 9	_{\$} 171.0
			When was the debt incurred?	
	IL	60507	As of the date you file, the claim is: Check all that apply.	
city	State	ZIP Code	Contingent	
			☐ Unliquidated ☐ Disputed	
			Type of NONDRIGRITY unsecured claim:	•
Debtor 1 and Debtor 2 only				
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a commu	nity debt		you did not report as priority claims	
☑ No			Other. Specify Credit use	
of the standard medical and administration of the desiration and an administration and administration of the standard medical and a stand	The grid of Malacol Safe Association Constitution	ttillettilletide ett til de gloviske i sener et deletatuisk kriterioriske skriterijettis = tij een, eet	one on the contract of the con	
Opportunity Financial Inpriority Creditor's Name			Last 4 digits of account number / U 0 3	\$ <u>1,950.00</u>
30 E Randolph St Ste 1650			When was the debt incurred?	
Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Vho incurred the debt? Check one.				
			La Disputed	
			Type of NONPRIORITY unsecured claim:	
			Student loans	
	situ daht		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	nty debt		Debts to pension or profit-sharing plans, and other similar debts	
			Other. Specify Credit use	
er Schrittsmitte i der Arterlande verseen sieder des vor Indonest verbeites sterland bezeigne bezeigne des sch	Heyely Coesniya adanadir	videntiletige etg vidio kalenderde de Novident viden et de Leon (1982). Version (1982)		\$90.00
		***************************************	Last 4 digits of account number O / Z Z	
390 Commerce Court		·	When was the debt incurred?	
	ОН	43125	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check one.			• • • • • • • • • • • • • • • • • • • •	
Debtor 1 only			LISPUTEO	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
I Check if this claim is for a commun	ity debt			
the claim subject to offset?			Other. Specify Credit use	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commust the claim subject to offset? No Yes Opportunity Financial Ronpriority Creditor's Name 130 E Randolph St Ste 1650 Rumber Street Chicago City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a commust the claim subject to offset? No Yes Proactiv Compriority Creditor's Name Street Chock one. Debtor 1 only Check if this claim is for a commust the claim subject to offset? No Yes Proactiv Compriority Creditor's Name Subject to offset? Debtor 1 only Debtor 2 only Check one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another	Nonpriority Creditor's Name P O Box 2020 Number Street Aurora IL City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt as the claim subject to offset? No Yes Opportunity Financial Compriority Creditor's Name 130 E Randolph St Ste 1650 City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt as the claim subject to offset? No Yes Proactiv Compriority Creditor's Name 390 Commerce Court Check if this claim is for a community debt as the claim subject to offset? No Yes Proactiv Compriority Creditor's Name 390 Commerce Court Comport Check if this claim is for a community debt as the claim subject to offset? No Yes Proactiv Commerce Court Commerce Court Comport Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Nonpriority Creditor's Name P O Box 2020 Number Street Aurora IL 60507 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt state claim subject to offset? No Yes Opportunity Financial Compriority Creditor's Name 130 E Randolph St Ste 1650 Chicago IL 60601 Check if this claim is for a community debt state claim subject to offset? No 1 Debtor 1 only Debtor 2 only Check if this claim is for a community debt state claim subject to offset? No 1 Yes Proactiv compriority Creditor's Name 1390 Commerce Court Uniber Street Chroweport OH 43125 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Commerce Court OH 43125 Chroweport OH 43125 Chrowe	When was the debt incurred?

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5					
PTSIR/ Physical Thera Nonpriority Creditor's Name	py & Sports Inj	ury Rehab	Last 4 digits of account number 1 4 0 7	\$0.0	
1816 W 170th St			When was the debt incurred? 10/02/2014		
Number Street Hazel Crest	IL.	60429	As of the date you file, the claim is: Check all that apply.		
City Who incurred the debt? Chec	State k one,	ZIP Code	Contingent Unliquidated Disputed		
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors an	d another		Student loansObligations arising out of a separation agreement or divorce that		
Check if this claim is for a ls the claim subject to offset? No Yes	-		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical		
QC Financial Services,	Inc dba Nation	al Quik Cash	Last 4 digits of account number 4 0 3 4	\$ <u>1,255</u> .0	
Nonpriority Creditor's Name 1451 Sibley Blvd			When was the debt incurred?	-	
Number Street Dolton	lL	60440	As of the date you file, the claim is: Check all that apply.		
City	IL State	60419 ZIP Code	Contingent		
Who incurred the debt? Check			Unliquidated		
Debtor 1 only	one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a community debt			you did not report as priority claims		
Is the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit use</u> 		
☑ No ☑ Yes					
The state of the s	výzedžielývojnoljo Nydjo čestudelo elicežným deljedá Liveljosoj	*************************************		s 82.00	
Radiology Imaging Cons Nonpriority Creditor's Name	sultants/ Ingalls	Advocate	Last 4 digits of account number 7 8 1 9	-	
9413 Eagleway Number Street			When was the debt incurred?		
Chicago	IL	60678	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed		
Debtor 1 only			rishriten		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and	another		Student loans		
Check if this claim is for a			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	community debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset? No Yes			Other. Specify medical		

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Annette Johnson Hampton

Your NONPRIORITY Unsecured Claims — Continuation Page

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28	Sand Ridge Dental Associat	es, LLC		Last 4 digits of account number 5 8 5 6	\$ 4,805.00
	Nonpriority Creditor's Name 1469 Ring Rd			When was the debt incurred?	T. 140-141-141-141-141-141-141-141-141-141-
	Number Street Calumet City	IL	60409	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and anoth	ner		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a comm	nunity debt		you did not report as priority claims	
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts	
	✓ No			Other. Specify medical	
	Yes				
29	Sears/ CBNA	eryan i aragustyan Priminery arbupus ya asusus	ett antillinets antiskelinet e velet kan et 2005et ian 1220 ete 124 et 2005et ian 1220 et 2005et, antiskelinet	Last 4 digits of account number 0 3 5 7	s 14,085,00
	Nonpriority Creditor's Name				\$ 17,000.00
	P O Box 6282			When was the debt incurred? 11/01/1996	
	Sioux Falls	SD	57117	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and anoth	er		Student loans	
	Check if this claim is for a comm	unity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		unity dest		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify credit use	
	☑ No □ Yes				
30		ettikk li ydyskolycia ddy odgoryci orgynya o opostala	tit de verdiging fallighen vilge en flagsformt, fra hans de en standskild blisten med e en greger		
	Southwest Laboratory Physic	ians S.C.		Last 4 digits of account number 0 6 6 8	\$37.00
	Nonpriority Creditor's Name			00/45/0044	
	One Ingalls Dr Number Street	*****		When was the debt incurred? 08/15/2014	
	Harvey	IL	60426	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another	भ		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commi	unity debt		you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	☑ No			☑ Other. Specify medical	(
	1/10				

Part 2:

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Debtor 1

Lasi Name

Nonpriority Creditor's Name	ter		Last 4 digits of account number 5 8 5 6	s 4	160.	
1469 Ring Rd			When was the debt incurred?	4		
Number Street Calumet City	IL.	60409	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	Contingent			
•			Unliquidated			
Who incurred the debt? Check	one.		Disputed			
Debtor 1 only			обращи			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only			Student loans			
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
is the claim subject to offset?			Other. Specify medical			
☑ No			Cition opening			
Yes						
00 метона на на на применения на применения на применения на	ttini et iku vit saati ee est saati saati saati saati saati keessa ee	Ne કેટમિયાન પ્રાપ્ત લેવના સ્થાપના સ્થાપના કરવા કરવા છે. સ્થાપના સ્થાપના સ્થાપના સ્થાપના સ્થાપના સ્થાપના સ્થાપના		2000 toras an resemblicanas	.0.50.500	
Synchrony Bank/ TJX Co	Dual Card		Last 4 digits of account number 2 9 9 1	\$_2,5	02.	
Nonpriority Creditor's Name			When was the debt incurred? 01/24/2013			
P O Box 965015 Number Street			Witer was the dept lifethled?			
Number Street Orlando	FL	22006	As of the date you file, the claim is: Check all that apply.			
City	F L. State	32896 ZIP Code	•			
	Otate	ZIF Code	Contingent			
Who incurred the debt? Check of	one.		Disputed			
Debtor 1 only			Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only						
At least one of the debtors and	another		Student loans			
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts			
s the claim subject to offset?			Other. Specify Credit use			
☑ No						
Yes						
FransUnion	99 (VAL — LAREID + 3 AMS LASH STÀMEISIN SERBIHNAL ANN AREID DÀNS ANN	ak kilondi, de Austria Burde a sandra i su e sant u r tipongo inte superiori participa (a sandra	Last 4 digits of account number 8 7 2 2	\$	0.0	
Vonpriority Creditor's Name		***************************************				
O Box 1000			When was the debt incurred?			
lumber Street Chester	PA	19022	As of the date you file, the claim is: Check all that apply.			
City	State	ZIP Code	Contingent			
			☐ Unliquidated			
Who incurred the debt? Check o	ne.		☐ Disputed			
Debtor 1 only						
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only			Student loans			
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that			
Check if this claim is for a community debt			you did not report as priority claims			
	omnomy dest		Debts to pension or profit-sharing plans, and other similar debts			
s the claim subject to offset? 2 No			Other. Specify notice only			

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Part 2:

Aft	er listing any entries on this page, number th	em beginning with	4.4, followed by 4.5, and so forth.	Total claim
34	Verizon Wireless		Last 4 digits of account number 3 0 9 2	s 98.0
	Nonpriority Creditor's Name P O Box 5029		When was the debt incurred?	
	Number Street	224	As of the date you file, the claim is: Check all that apply.	
	Wallingford CT City State	06492 ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify medical	
	Yes			
35	Village of Dolton	TO PARK TO MISSA BANDA BANDA PARKA BANDA BANDA BANDA BANDA BANDA PARKA BANDA PARKA BANDA PARKA BANDA PARKA BANDA	Last 4 digits of account number 5 7 0 1	s 114.00
	Nonpriority Creditor's Name		When was the debt incurred?	***************************************
	14122 Chicago Road		was the dept incurred?	
	Dolton IL	60419	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		a sopare	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit use	
	☑ No		Guer. Specify Grount 430	
· · · · · · · · · · · · · · · · · · ·	Yes			
36	Village of Lyons Ambulance	er i version en en seu en seu seu seu seu en en en seu seu se seu de la seu d'année de la seu de la seu de la s	Last 4 digits of account number 4 1 0 0	_{\$} 1,035.00
	Nonpriority Creditor's Name		07/04/0044	
	P O Box 457 Number Street		When was the debt incurred? 07/31/2014	
	Wheeling IL	60090	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		war Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	·		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No Yes		Other. Specify	

Part 2:

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Debtor 1

Last Name

Your NONPRIORITY Unsecured Claims - Continuation Page

Advocate Medical Gr	oup		Last 4 digits of account number 5 8 4 8	s18	34.00
8550 W Bryn Mawr A	ve 8th Floor		When was the debt incurred? 05/23/2017		
Number Street Chicago	IL	60631	As of the date you file, the claim is: Check all that apply.		
City Who incurred the debt? Cr Debtor 1 only Debtor 2 only		ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors Check if this claim is for	and another		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 		
Is the claim subject to offs ☑ No ☐ Yes	et?		Other. Specify medical		
Dr. Ankur Chhadia Mi	rintenderitationeritation il allinoisti, etitoti allinoistikaistikaistikaistikaistikaistikaistikaistikaistikai	e en encontrol de la francisco frence e la compaña por encontrol en parte e especi	Last 4 digits of account number 8 7 2 2	s 30	3.00
Nonpriority Creditor's Name 1229 W Randolph St			When was the debt incurred? 02/02/2017	¥	
Number Street Chicago	IL	60607	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Ch	eck one		Unliquidated		
Debtor 1 only	eck one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors			Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for	r a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
is the claim subject to offse	et?		Other. Specify medical		
☑ No ☐ Yes					
ta ya Arandah tahun an katapan darik katangan katangan katangan bananta tang katangan salaga katangan banan ka	^t an finish kang di danggan tanggan kang kang danggan tanggan kang danggan kang danggan kang danggan kang danggan	BPAN BERSANI KASSARIAN BARI BARI BARI KATUAN ANAMAN BISHI BIRILIH KATUAN BARISH		s (0.00
United States Postal S	Service		Last 4 digits of account number 8 7 2 2	· ·	
P O Box 970400 Number Street			When was the debt incurred? 06/26/2017		
Greensboro	NC	27497	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Che	all and		☐ Unliquidated		
Debtor 1 only	ck one.		☐ Disputed		
Debtor 1 only			Type of NONDBIODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors a	and another		Student loans		į
Check if this claim is for	a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offse ☑ No	t?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify notice only		

Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Allied Interstate, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 361445			1 n 22
Number Street			Line 32 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claim
Columbus	OH State	43236	Last 4 digits of account number 2 4 3 4
tina a Perina di Triba da mana di Santa di Santa da Managara da Managara da Managara da Managara di Managara d Managaran di Triba da Managaran	State	ZIP Code	
Client Services, Inc			On which entry in Part 1 or Part 2 did you list the original creditor?
3451 Harry S Truman Blv	d		Line 32 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		*****	Part 2: Creditors with Nonpriority Unsecured
· · · · · · · · · · · · · · · · · · ·			Claims
Saint Charles	MO State	63301 ZIP Code	Last 4 digits of account number 5 4 9 6
e e e e e e e e e e e e e e e e e e e	Oldie		
Comenity Capital/ HSN		1	On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 183043			Line 13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims Claims
Columbus	ОН	43218	Last 4 digits of account number 1 1 8 9
O	State	ZIP Code	
Comenity Capital/ HSN			On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 9090			Line 13 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Clearwater	FL	33758	Last 4 digits of account number 3 2 8 6
Sity Sanatas sana are esembles and an area and an area and are	State	ZIP Code	
OSNB/Macys			On which entry in Part 1 or Part 2 did you list the original creditor?
lame			
P O Box 6167			Line 15 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Falls	SD	57117	
	State	ZIP Code	Last 4 digits of account number 2 8 6 0
GLA Collections			On which entry in Part 1 or Part 2 did you list the original creditor?
ame			
O Box 991199			Line 27 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Greek			Part 2: Creditors with Nonpriority Unsecured Claims
ouisville.	KY	40269	
Ety	State	ZIP Code	Last 4 digits of account number 7 7 2 0
IRRG/ Healthcare Revenu	ue Recov	very Group	On which ontry in Bort 4 or Bort 3 did not 11-14b and 12-15 and 12-15
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
O Box 459080		***	Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Sunrise	FL	33345	0.2.0.7
y	State	ZIP Code	Last 4 digits of account number 9 2 0 7

ZIP Code

Debtor 1

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Annette Johnson Hampton

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Ingalls Memorial Hosp	ital		On which entry in Part 1 or Part 2 did you list the original creditor?
One Ingalls Drive			Line 19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			
			Part 2: Creditors with Nonpriority Unsecured Cl
Harvey city	IL State	60426 ZIP Code	Last 4 digits of account number 1 6 8 2
. Note \$1.00 transmission material free which exists are up up encourage and up up	Serversed meshery megasyasyasyasyasy	ZIP Code	
Kohls Dept Store/ Cap	ital One		On which entry in Part 1 or Part 2 did you list the original creditor?
P O Box 3043			Line 20 of (Check one): Part 1: Creditors with Priority Unsecured Claim:
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Milwaukee	WI	53201	7 0 0 0
City	State	ZIP Code	Last 4 digits of account number 7 2 6 6
Malcolm S Gerald & A	ssoc/ Finan	cial Recov	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
332 S Michigan Ave St Number Street	te 600		Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Addition Street			Part 2: Creditors with Nonpriority Unsecured Claims
OL:			Olding
Chicago Dity	IL State	60604 ZIP Code	Last 4 digits of account number 1 8 3 4
tita talifarra (i memperimanan arabah seri ada errenderan dan di georgia (imperimanan), egip	Million of the control of the contro	er eg en ertret - Serge it til som i ser en en en en en en en en egeneen, som je ste stjere	
MRSI/ Medical Recove	ny opecians	il, LLC	On which entry in Part 1 or Part 2 did you list the original creditor?
2250 E Devon Ave Ste	352		Line 19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Des Plaines	IL	60018	1.44.8.9.5
Dity	State	ZIP Code	Last 4 digits of account number 1 7 7 5
Sonnenschein Financia	al Service	autherstein (n. 6. a. 11. Etgenteils, egypteils (1. a. 11. a. 12. a.).	On which ontox in Bort 1 or Bort 2 did you like the existing local trace.
vame			On which entry in Part 1 or Part 2 did you list the original creditor?
2 Transam Plaza Dr St	e 300		Line 36 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Oakbrook Terrace	IL	60181	Last 4 digits of account number 4 1 0 0
Dity and he and him have magnetic group has a section to the annical and a section of the sectio	State	ZIP Code	Last 4 digits of account number 1 1 V V
United Collection Burea	au Inc		On which entry in Part 1 or Part 2 did you list the original creditor?
lame			
5620 Southwyck Blvd S	Ste 206		Line 29 of (Check one): Deart 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Toledo	OH	43614	Last 4 digits of account number 3 8 5 9
ity	State	ZIP Code	
Vision Financial Service) S		On which entry in Part 1 or Part 2 did you list the original creditor?
lame			
O Box 1768			Line 19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Single Suget			Part 2: Creditors with Nonpriority Unsecured
.aPorte		100	Claims
TAMOMO	IN	46352	Last 4 digits of account number 5 2 9 0

Debtor 1

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Annette Johnson Hampton

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	ANNAMA
Total claims	6f.	Student loans	6f.	Total claim	0.00
Total claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim	0.00
	6 g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		Total claim \$ \$ \$	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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Fi	ll in this i	nformation to	identify you	ur case:			
		Annette Jo					
De	ebtor	First Name	71113011 1 Id	Middle Name	Last Name		
	btor 2 ouse If filing)	N/A First Name	**************************************	Middle Name	Last Name	***************************************	
Ur	ited States	Bankruptcy Cou	irt for the: Nort	thern District of	Illinois		
Ca	se number						
	known)	***************************************					Check if this is an
						***************************************	amended filing
Of	ficial l	orm 10	6G				
				toni Ca	ntracts a	nd Unexpired Lease	
into add	rmation. I itional pa	f more space ges, write you	is needed, our name and	copy the additi I case number (onal page, fill it ou (if known).	g together, both are equally responsit , number the entries, and attach it to t	ole for supplying correct this page. On the top of any
1.	Mo. C	heck this box	and file this f	acts or unexpir form with the cou below even if the	urt with your other se	thedules. You have nothing else to report are listed on Schedule A/B: Property (O	t on this form. fficial Form 106A/B).
2.	List sepa example, unexpired	, rent, venicie	erson or co lease, cell p	mpany with wh phone). See the	om you have the constructions for this	ontract or lease. Then state what each form in the instruction booklet for more e	contract or lease is for (for xamples of executory contracts and
	Person o	r company w	ith whom yo	ou have the cor	ntract or lease	State what the contract or	lease is for
2.1	N/A					,	
	Name						
	Number	Street					
		Ollect					
	City		State	ZIP Code			and an explainable of the control of
2.2	N/A						
	Name						
	Number	Street					
	City		State	ZIP Code		Middle-August	
2.3		the transfer to the test to the test to the constitution of the test to the te	outrodonium en	ZIF Code	Such the result with a the method group superproduction of the second state of the sec	eta pentala de trata de empleo de estado (1915, a conserva mas estado estado en mesmo estado en mesmo proventa	e mentenskil meter ende stil i skrivet kligteren sek et sterktil skrivet i misse som elle skrivet en se med me
	N/A Name						
	Number	Street					
	City	er en ar ar ar ar en	State	ZIP Code		and the control of th	
2.4	N/A						
	Name						
	Number	Street					
	City			710 0		····	
2.5	City	and the second second second second second	State	ZIP Code	erindikan promonen erindikan periode kanan dan berangan dan berangan berangan berangan berangan berangan berang	eta karan kanada dina kana maka maka karan maka kana maka karan karan kana kana kana kana kana	de militar de metambe de distribuira and conseptibilità de la consecució de la consecució de la consecució de d
	N/A Name						
	1 TG1 110						
	Number	Street				MARAMAN.	
	City		State	ZIP Code		MANIGA 4p-	

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Fill in this information to identify your case:	
Debtor 1 Annette Johnson Hampton	
First Name Middle Name Last Name Debtor 2 N/A	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Central District of Illinois	
Case number (If known)	
	☐ Check if this is an amended filing
Official Form 106H	аполоси пяту
Schedule H: Your Codebtors	
	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be as a care filing together, both are equally responsible for supplying correct information. If morand number the entries in the boxes on the left. Attach the Additional Page to this page. case number (if known). Answer every question.	re space is needed convitte Additional Page fill it out
1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a	codebtor.)
☑ No	
☐ Yes	
 Within the last 8 years, have you lived in a community property state or territory? (C Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washing 	Community property states and territories include
No. Go to line 3.	gion, and wisconsin.)
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
□ No	
Yes. In which community state or territory did you live? Fil	I in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	
City State ZIP Code	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if y shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. M Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule C Schedule E/F, or Schedule G to fill out Column 2.	lake sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	선 후 하다 하는 나는 사실에 하는 사람들은 살살을 받는 것을 하는데 함께 다른 사람들이 되었다.
3.1 N/A	Check all schedules that apply:
N/A Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
3.2 N/A	C) Sahadula D III-
Name	Schodule D, line
Number Street	Schedule E/F, line
City State ZIP Code	-
10	man and the second of the seco
N/A Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZiP Code	_

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Fill in this information to identify	v vour case:				
Debtor 1 Annette Johnson First Name	Middle Name	Last Name			
Debtor 2 N/A (Spouse, if filing) First Name	Middie Name	Last Name			
United States Bankruptcy Court for the:		Lasting			
	Northern District of minors				
Case number (If known)				Check if t	····- · - ·
- THE STATE OF THE					nended filing plement showing postpetition chapter 13
					e as of the following date:
Official Form 106I	_			MM / E	DD / YYYY
Schedule I: You	ur Income				12/15
supplying correct information. If y	rou are married and not filir use is not filing with you, d e top of any additional pag	ng jointly, and yo lo not include in	our spouse formation	e is living with y	or 2), both are equally responsible for you, include information about your spouse. buse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	ed	AMPHAN (AMPAN AMPRICA) AND AMPAN	Employed Not employed
Include part-time, seasonal, or self-employed work.	• "	Clerk			, , , , ,
Occupation may include student or homemaker, if it applies.	Occupation				
	Employer's name	United States	Postal S	Service	
	Employer's address	P O Box 9704 Number Street	400		Number Street
		Greensboro	NC	27497	
		City	State Z	IP Code	City State ZIP Code
	How long employed there	? 30 yrs 1m			30 yrs 1m
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse ha below. If you need more space, a	ave more than one employer.	combine the info			ite \$0 in the space. Include your non-filing or that person on the lines
, , , , , ,			F	or Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sali deductions). If not paid monthly,	ary, and commissions (befo	ore all payroll vage would be.	2. \$	3,411.00	Site of the desired property and the contraction of
3. Estimate and list monthly over	time pay.		3. + \$_	0.00	+ \$
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$_	3,411.00	\$

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Copy line 4 here	▶ 4. 5a.	Fc \$_	3,411.00			ebtor 2 or ling spouse		
 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 		\$_	3 411 00		CONTRACTOR	ing spouse		
 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5a.		<u> </u>		\$		-	
 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5a.							
 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 		\$	683.65		\$			
 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5b.	\$_	0.00					
 5e. Insurance 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5c.	\$_	50.00					
 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5d.	\$	0.00					
 5g. Union dues 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5e.	\$	227.52					
 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5f.	\$_	0.00		\$			
 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5g.	\$_	54.28		\$	·······		
 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. 	5h.	+\$_	0.00		+ \$			
List all other income regularly received: 8a. Net income from rental property and from operating a business.	6.	\$	1,015.45		\$			
8a. Net income from rental property and from operating a business.	7.	\$_	2,395.55		\$			
8a. Net income from rental property and from operating a business.								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$			
Ob historia	8b.	æ	0.00		¢			
8c. Family support payments that you, a non-filing spouse, or a dependen regularly receive		Ψ			Ψ			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00		\$			
8d. Unemployment compensation	8d.	\$	0.00		\$			
	8e.	\$	0.00		\$			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	е							
Specify:	8f.	\$	0.00		\$			
8g. Pension or retirement income	8g.	\$	0.00		\$			
8h. Other monthly income. Specify:	8h.	+\$	0.00		+\$	1		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$]	
O. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,395.55	+	\$	0.00	=	\$ 2,395.55
 State all other regular contributions to the expenses that you list in Schedu Include contributions from an unmarried partner, members of your household, you friends or relatives. 	•			L			J	
Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	ur de	epende						

Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

12. Combined monthly income

0, 400	Jou expect all	micrease of	ucciease	AA LEESTEE FLEG	year aner	you me this form	11
V	No.					•	- "

☐ Ye	es. Explai
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Official Form 106I

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Fill in this information to identif	y your case:			
Debtor 1 Annette Johnson	Hampton			
Pirst Name Debtor 2 N/A	Middle Name Last Name	Check if thi		
(Spouse, if filing) First Name	Middle Name Last Name	An ame	~	
United States Bankruptcy Court for the	: Northern District of Illinois		ement showing pos es as of the followin	tpetition chapter 13
Case number (If known)		MM / DD		g date.
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil ded, attach another sheet to this forn n.	ing together, both are equally re n. On the top of any additional p	sponsible for supply ages, write your nan	/ing correct ne and case number
Part 1: Describe Your Ho	usehold			
1. Is this a joint case?				
✓ No. Go to line 2.✓ Yes. Does Debtor 2 live in a	separate household?			
□ No				
·	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☐ No		na i Salam Sara angan ayan ganggayangga ay ila ana ana ana a a ana a a a ana an	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		son	19	☐ No ☑ Yes
		######################################	~~.	☐ No
				☐ Yes
				U No □ Yes
				☐ No
				Yes
				☐ No
Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☑ Yes			☐ Yes
Part 28 Estimate Your Ongo	ing Monthly Expenses			
	bankruptcy filing date unless you a	re using this form as a supplement	oot in a Chapter 42 a	
expenses as of a date after the bar applicable date.	rkruptcy is filed. If this is a suppleme	ental Schedule J, check the box	at the top of the form	ase to report and fill in the
	n-cash government assistance if you		green en groots	A CONTRACT NAME OF THE PARTY.
	d it on Schedule I: Your Income (Offic	•	Your expen	nses
 The rental or home ownership e any rent for the ground or lot. 	expenses for your residence. Include	first mortgage payments and	4. \$	1,009.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or re			4b. \$	0.00
4c. Home maintenance, repair, a	. , ,		4c. \$	75.00
4d. Homeowner's association or	condominium dues		4d. \$	0.00

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Debtor 1 Annette Johnson Hampton

unsoute t		JUH
M1 1 2 4		
First Name	Middle Name	Last Name

Case number (if known)_____

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	165.00
	6b. Water, sewer, garbage collection	6b.	\$	45.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	240.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	495.00
8.	Childcare and children's education costs	8.	\$	0.00
9,	Clothing, laundry, and dry cleaning	9.	\$	73.00
10.	Personal care products and services	10.	\$	61.00
11.	Medical and dental expenses	11.	\$	25.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	235.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a,	\$	78.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	457.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxos Do not include toxos deducted from your any animated in the second			•
10.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	485.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	2.22
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	

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Debtor	Annette Johnson Hampton First Name Middle Name Last Name	Case number (if known)	***************************************	
21. Ot	her. Specify:	21.	+\$	0.00
22. Ca	iculate your monthly expenses.			
228	a. Add lines 4 through 21.	22a.	\$	3,153.00
221	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22 b.	\$	0.00
220	c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	3,153.00
23. Calc	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,395.55
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,153.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-757.45
24. Do y	ou expect an increase or decrease in your expenses within the year after you	file this form?		
	example, do you expect to finish paying for your car loan within the year or do you ex gage payment to increase or decrease because of a modification to the terms of you			
Z	ło.			
☐ Y	es. Explain here:			

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ill in this information to identify your case:			
ebtor 1 Annette Johnson Hampton			
First Name Middle Name	Last Name		
ebtor 2 IV/A spouse, if filing) First Name Middle Name	Last Name		
nited States Bankruptcy Court for the: Northern District of Illi	nois		
ase number fknown)	MARINE P. COLUMN		
			Check if this is
		-	amended filing
Official Forms 400D			
Official Form 106Dec			
Declaration About an I	ndividual [ebtor's Schedules	12/15
If two married people are filing together, both are ed	ually recognible for an		
You must file this form whenever you file bankrupto obtaining money or property by fraud in connection	y scriedules of amended	schedules, making a false statement, concealing	property, or
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 357	1.	, , , , , , , , , , , , , , , , , , , ,	up to 20
, , , , , , , , , , , , , , , , , , , ,			
0:			
Sign Below			
Did you pay or agree to pay someone who is NO	T an attorney to help you		
☑ No		I fill out bankruptcy forms?	
L		ı fill out bankruptcy forms?	
Yes. Name of person			and
☐ Yes. Name of person	-	Attach Bankruptcy Petition Preparer's Notice, Declaration,	and
☐ Yes. Name of person			and
☐ Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration,	and
☐ Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration,	and
		Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119).	and
Under penalty of perjury, I declare that I have reathat they are true and correct.		Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119).	and
Under penalty of perjury, I declare that I have rea		Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119).	and
Under penalty of perjury, I declare that I have rea		Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119).	and
Under penalty of perjury, I declare that I have rea	d the summary and sche	Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119).	and
Under penalty of perjury, I declare that I have rea		Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Addules filed with this declaration and	and
Under penalty of perjury, I declare that I have rea	id the summary and sche	Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Addules filed with this declaration and	and
Under penalty of perjury, I declare that I have rea	od the summary and sche	Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). edules filed with this declaration and	and
Under penalty of perjury, I declare that I have rea	od the summary and sche	Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Addules filed with this declaration and	and

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Debtor 1		your case:			
	Annette Johnson H	Hampton Middle Name	Last Name		
ebtor 2	N/A				
oouse, if filing)		Middle Name	Last Name		
	Bankruptcy Court for the:	vortnern District of	Illinois		
se number mown)					Check if this is a
					amended filing
ficial F	Form 107				
atem	ent of Finan	cial Affai	rs for Indiv	riduals Filing for Bankruptc	y 04 <i>i</i>
as comple	te and accurate as po	ssible. If two mar	ried people are filing	g together, both are equally responsible for supply	ing correct
ormation. I	f more space is neede	ed, attach a separ	ate sheet to this for	m. On the top of any additional pages, write your n	ame and case
nber (it kno	own). Answer every qu	Jestion.			
art 1: G	ive Details About Y	our Marital Sta	itus and Where Y	ou Lived Before	
What is ye	our current marital sta	itus?			
Marrie					
🗹 Not m	arried				
Drowin w Ale		12			
	e last 3 years, have yo	u lived anywhere	other than where y	ou live now?	
☑ No	ist all of the places you	fixed in the fact 2	unnen De met imelude	a colonia de como Pica de constante de Carta de	
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	iived in the last 3		The state of the s	and the second second
Debt	tor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2
					lived there
				☐ Same as Debtor 1	lived there
				☐ Same as Debtor 1	lived there
Num	iber Street		From	Same as Debtor 1 Number Street	lived there Same as Debtor From
Num	iber Street		From		lived there Same as Debtor
Nurr	ber Street				lived there Same as Debtor From
Nurr		State ZIP Code			lived there Same as Debtor From
		State ZIP Code		Number Street	lived there Same as Debtor From To
		State ZIP Code	To	Number Street City State ZIP Code	Same as Debtor From To Same as Debtor
		State ZIP Code	To	Number Street City State ZIP Code	Same as Debtor To Same as Debtor
City		State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor From To Same as Debtor
City		State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor To Same as Debtor
City	ber Street	State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1	Same as Debtor To Same as Debtor
City	ber Street	State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor From To Same as Debtor From Tro Tro Tro Tro
City Num City	ber Street	State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor From To Same as Debtor From Tro Community property
Num City Within the	ber Street	State ZIP Code	To	Number Street City State ZIP Code Same as Debtor 1 Number Street City State ZIP Code	Same as Debtor From To Same as Debtor From Tro Community property
City Num City Within the states and	ber Street	State ZIP Code ever live with a spona, California, Ida	To From To pouse or legal equive ho, Louisiana, Nevac	Number Street City State ZIP Code Number Street City State ZIP Code Valent in a community property state or territory? (da, New Mexico, Puerto Rico, Texas, Washington, and	Same as Debtor From To Same as Debtor From Tro Community property

Official Form 107

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Annette Johnson Hampton

Debtor 1	Annette Johnson Hampton		Case no	mber (if known)	
	First Name Middle Name Las	t Name	0430 110	(II NIOWII)	
Fil If :	d you have any income from employme Il in the total amount of income you receive you are filing a joint case and you have inc	ed from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$22,087.66	Wages, commissions, bonuses, tips	\$
				Operating a business	
	For last calendar year:	Wages, commissions, bonuses, tips	\$6,832.00	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31,2016	Operating a business		Operating a business	
	For the calendar year before that:	☑ Wages, commissions, bonuses, tips		☐ Wages, commissions,	
	(January 1 to December 31, 2015	Operating a business	\$ 37,540.00	bonuses, tips Operating a business	\$
Lis	mbling and lottery winnings. If you are filing t each source and the gross income from one of the organization of the properties and the gross income from one of the organization of the				under pebior 1.
H	Yes. Fill in the details.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until		\$		\$
	the date you filed for bankruptcy:		\$		\$
			\$		\$
	For last calendar year:	<u>IOD</u>	16,513.56		\$
	(January 1 to December 31,2016)		B		\$
		***************************************	.	4	\$
	For the calendar year before that:	IOD s	13,163.80		\$
	(January 1 to December 31,2015)				\$
	YYYY				*

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Case number (if known)_

Annette Johnson Hampton
First Name Middle Name

Last Name

Debtor 1

	List Certain Payments You Made Bef	ore You Filed	for Ban	kruptcy					
Are eith	ner Debtor 1's or Debtor 2's debts primarily	consumer debt	s?						
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?								
	☐ No. Go to line 7.			·					
	Yes. List below each creditor to whom you total amount you paid that creditor, child support and alimony. Also, do	Do not include pa	ayments fo	or domestic supp	port ob	ligations, such as			
	* Subject to adjustment on 4/01/19 and every			-		• •			
1 Yes	. Debtor 1 or Debtor 2 or both have primaril			o mod on or and	JI 1.10 C	ato or adjustmont.			
	During the 90 days before you filed for bankr			ditor a total of \$6	SOO or	more?			
		apiay, ala you pa	y arry cres	Jitoi a total or pt	JOO 01 :	nore:			
	No. Go to line 7.								
	Yes. List below each creditor to whom yo creditor. Do not include payments for alimony. Also, do not include payments	or domestic suppo	ort obligat	ions, such as ch	ild sup	nt you paid that port and			
		Dates of payment	Total an	ount paid	Amo	unt you still owe	Was this payment for		
	Wells Fargo Home Mortgage	06/13/2017	\$	1,009.46	\$	109,230.00	☑ Mortgage		
	Creditor's Name						Car		
	P O Box 10335	***************************************					Credit card		
	Teacher Suppl						Loan repayment		
	**************************************	***************************************					Suppliers or vendor		
	Des Moines IA 50306						Other		
	City State ZIP Code						Ciner		
			•						
	Creditor's Name	***************************************	\$		\$	· · · · · · · · · · · · · · · · · · ·	☐ Mortgage		
							Car		
	Number Street						Credit card		
							Loan repayment		
							Suppliers or vendor		
	City State ZIP Code						Other		
	,								
	On alltade Norman		\$		\$		☐ Mortgage		
	Creditor's Name						☐ Car		
	Number Street						Credit card		
	Number Street								
	unuper 2treet						Loan repayment		
	Number Street						Loan repayment Suppliers or vendors		

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Within 1 year before you filed for bankruptcy, did y Insiders include your relatives; any general partners; re corporations of which you are an officer, director, pers agent, including one for a business you operate as a s	ou make a p	navment on a debt w	Case number (# known	
Insiders include your relatives; any general partners; recorporations of which you are an officer, director, pers	ou make a p	navment on a debt v	PPP PART AND	ANNA Annual molembra ann an gan gan gan gan gan gan gan gan
such as child support and alimony.	on in control,	y general partners; p or owner of 20% or i	partnerships of which more of their voting	ch you are a general partner; securities; and any managing
 ☑ No				
Yes. List all payments to an insider.				
	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	i
Number Street	·	-		· :
	·	-		:
City State ZIP Code				· · ·
Insider's Name		\$	\$	
Number Street		-		
		-		
City State ZIP Code				
 //ithin 1 year before you filed for bankruptcy, did you in insider? nclude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider. 		payments or transf	fer any property o	n account of a debt that benefited
	Dates of	Total amount	Amount you still	Reason for this payment
	payment	paid AMARIA	owe	Include creditor's name
Insider's Name		\$	\$	
Number Street				
	property of the state of the st			
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				

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btor 1	Annette Johnson Hampton	Case number (# known)	
	First Name Middle Name Last Name	Ouse Million (# Niveri)	And the state of t
Part 4:	Identify Legal Actions, Repossess	ione and Forcelocures	
List at	is a year before you filed for bankruptcy, w I such matters, including personal injury case	vere you a party in any lawsuit, court action, or administrative proceed es, small claims actions, divorces, collection suits, paternity actions, suppo	ding?
and co	ontract disputes.	55, small claims actions, divorces, collection suits, paternity actions, suppo	rt or custody modification
S No			
	es. Fill in the details.		
	Na!	ture of the case Court or agency	Status of the case
_			_
C	case title	Court Name	Pending
			On appeal
		Number Street	Concluded
C	Case number		
		City State ZIP Code	
~	case title		— Pending
	ase me	Court Name	
			On appeal
		Number Street	Concluded
С	ase number		
		City State ZIP Code	
		Describe the property Date	Value of the property
	Creditor's Name		\$
	Number Street	Explain what happened	
		Property was repossessed.	
		Property was foreclosed.	
		Property was garnished.	
	City State ZiP Code	Property was attached, seized, or levied.	ن المعالم المعا
		Describe the property Date	Value of the property
			against the first of the feet
			c
	Creditor's Name		Φ
	Number Street		
		Explain what happened	
		Property was repossessed.	
	- TT TO THE REP AND	Property was foreclosed.	
		Property was role closed. Property was garnished.	
	City State ZIP Code	Property was attached, seized, or levied.	
		- · · · · · · · · · · · · · · · · · · ·	

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Annette Johnson Hampt First Name Middle Name	ton Last Name	Case number (# known)	
counts or refuse to make a paym	bankruptcy, did any creditor, including ent because you owed a debt?	a bank or financial institution, set off any amo	unts from your
No Yes. Fill in the details.			
roo. rai ar the detune.	September 14 de Servicio de la como		100 MARK 118 A 18
	Describe the action the creditor t	ook Date action / was taken	mount
Creditor's Name		Sandara di Mitalanca dal mira di Mangrata de Sandara de	
Number Street	WITTER AND	\$	·
management of the state of the	MM	: 	
City State ZIP	Code Last 4 digits of account number	: XXXX	
hin 1 year before you filed for ba	ınkruptcy, was any of your property in t	the possession of an assignee for the benefit o	ıf
	er, a custodian, or another official?		
No Yes			
165			
List Certain Gifts and Co	entributions		
thin 3 was bafara was filed for t	manufacture all discounts are not		
nin 2 years before you filed for ba	ankruptcy, did you give any gifts with a	total value of more than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than	n \$600 Describe the gifts	Dates you gave	Value
per person		the gifts	
Person to Whom You Gave the Gift			\$
		·	\$
Number Street			
		:	
City State ZIP			
The state of the s	Code		
•	Code		
•	Code		
Person's relationship to you Gifts with a total value of more than \$		Dates you gave	Value
Person's relationship to you Gifts with a total value of more than \$		Dates you gave the gifts	Value
Person's relationship to you Gifts with a total value of more than \$ per person		Dates you gave the gifts	Value
Person's relationship to you Gifts with a total value of more than \$ per person		Dates you gave the gifts	Value \$
Person's relationship to you Gifts with a total value of more than \$		Dates you gave the gifts	Value \$
Person's relationship to you Gifts with a total value of more than \$ per person		Dates you gave the gifts	Value \$
Person's relationship to you Gifts with a total value of more than \$ per person Person to Whom You Gave the Gift		Dates you gave the gifts	Value \$ \$
Person's relationship to you Gifts with a total value of more than \$ per person Person to Whom You Gave the Gift		Dates you gave the gifts	Value \$\$
Person's relationship to you Gifts with a total value of more than \$ per person Person to Whom You Gave the Gift Number Street	5600 Describe the gifts	Dates you gave the gifts	Value \$
Person's relationship to you Gifts with a total value of more than \$ per person Person to Whom You Gave the Gift	5600 Describe the gifts	Dates you gave the gifts	Value \$ \$

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or 1 America Johnson nampion First Name Middle Name D	Case number (if known)	
cust warne who warne t	ast Name	
Within 2 years before you filed for bankr	uptcy, did you give any gifts or contributions with a total valu	e of more than \$600 to any charity?
2 No		
Yes. Fill in the details for each gift or co	ntribution.	
Gifts or contributions to charities	Describe what you contributed	Date you Value
that total more than \$600		contributed
Charity's Name		\$
• · · · · · · · · · · · · · · · · · · ·		
	AAA.	\$
		:
Number Street		
		· ·
City State ZIP Code	-	
		-
6 List Certain Losses		
how the loss occurred	Include the amount that insurance has paid. List pending insurance	loss lost
	claims on line 33 of Schedule A/B: Property.	Elitable velicens
	· · · · · · · · · · · · · · · · · · ·	\$
•	· ·	
W. W. State of the Control of the Co		
72 List Certain Payments or Tra	nsfers	
/ithin 1 year before you filed for bankrup	otcy, did you or anyone else acting on your behalf pay or trans	sfer any property to anyone
ou consulted about seeking bankruptcy	or preparing a bankruptcy petition?	· -
	reparers, or credit counseling agencies for services required in yo	ur bankruptcy.
No .		
Yes. Fill in the details.	the soft of the first of the society of the first of the company of the society o	
	Description and value of any property transferred	Date payment or Amount of payment
Person Who Was Paid		transfer was made
Number Street		<u> </u>
	:	<u></u> \$
City State ZIP Code		
Email or website address		
Person Who Made the Payment, if Not You		

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	First Name Middle Name Last	Name	Case number (if known)		
100	open meneral meneral meneral period and an established and an establis	Description and value of any property (Date payment or transfer was made	Amount of payment
	Person Who Was Paid			e Sangapan galaman galaman	
	reison who was Paid				\$
	Number Street	:		-	
					\$
	City State ZIP Code				
	Email or website address	•			
	Person Who Made the Payment, if Not You				
on 1	nised to help you deal with your credit ot include any payment or transfer that yo lo	ou listed on line 16.			
	es. Fill in the details.				
		Description and value of any property to		Date payment or	Amount of pays
				transfer was made	
	Person Who Was Paid	and the second section of the section of the second section of the second section of the second section of the section of the second section of the			
	Number Street				\$
					\$
	City State ZIP Code in 2 years before you filed for bankrup	tcy, did you sell, trade, or otherwise t	transfer any property to	anyone, other that	n property
ithians clud o no	in 2 years before you filed for bankrup oferred in the ordinary course of your be de both outright transfers and transfers mo to include gifts and transfers that you hav	pusiness or financial affairs? nade as security (such as the granting o e already listed on this statement.	f a security interest or m	ortgage on your prop	erty).
ithi ans clud o no	in 2 years before you filed for bankrup sferred in the ordinary course of your be de both outright transfers and transfers mot include gifts and transfers that you have	ousiness or financial affairs? nade as security (such as the granting o		ortgage on your prop	erty).
ithi ans clui o no N	in 2 years before you filed for bankrup sferred in the ordinary course of your be de both outright transfers and transfers mot include gifts and transfers that you have	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property of	ortgage on your prop	erty). Date transfe
ithians cluicond N	in 2 years before you filed for bankrup sferred in the ordinary course of your be de both outright transfers and transfers mot include gifts and transfers that you have lough each of the details.	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property of	ortgage on your prop	erty). Date transfe
ithians clude one of N	in 2 years before you filed for bankrup of the ferred in the ordinary course of your beginning the both outright transfers and transfers mot include gifts and transfers that you have to fee. Fill in the details. Person Who Received Transfer	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property of	ortgage on your prop	erty). Date transfe
ithians cluid on no	in 2 years before you filed for bankrup of the property of the ordinary course of your beginned in the ordinary course of your beginned to the property of the	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
ithians clude on the clude of t	in 2 years before you filed for bankrup of the ferred in the ordinary course of your bede both outright transfers and transfers mot include gifts and transfers that you have to fees. Fill in the details. Person Who Received Transfer Number Street	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
ithians clude one in the interest of the interest one in the interest of the interest one in the interest one in the interest of the interest one in the interest one	in 2 years before you filed for bankrup of the ferred in the ordinary course of your beginning the both outright transfers and transfers most include gifts and transfers that you have longer. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
ithians clude one of N	in 2 years before you filed for bankrup sferred in the ordinary course of your bede both outright transfers and transfers mot include gifts and transfers that you have to fees. Fill in the details. Person Who Received Transfer City State ZIP Code Person's relationship to you	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transfe
rithians and an	in 2 years before you filed for bankrup sferred in the ordinary course of your bede both outright transfers and transfers mot include gifts and transfers that you have to fees. Fill in the details. Person Who Received Transfer City State ZIP Code Person's relationship to you	pusiness or financial affairs? nade as security (such as the granting of ealready listed on this statement. Description and value of property	f a security interest or m Describe any property or debts paid in exchan	ortgage on your prop	erty). Date transf

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Vithin '	First Name	nson Hampton Middle Name	Last Name	Case number (# kno	эжп)	
Vithin '						
re a b	10 years before eneficiary? (The	e you filed for ban lese are often calle	kruptcy, did you transfer any prop d asset-protection devices.)	erty to a self-settled trus	t or similar device of	which you
∄ No ☑ Yes	s. Fill in the deta	ils.				
			Description and value of the pro			Date transfer
						was made
Nam	ne of trust		-			
						÷

8: L	List Certain F	inancial Accou	nts, Instruments, Safe Depos	it Boxes, and Storag	e Units	gang and gangleration to think the best built to be supply a graph as gangleration.
			uptcy, were any financial accounts			- L
osed,	, sold, moved,	or transferred?	apicy, were any imancial accounts	; or instruments neid in)	your name, or tor you	r benefit,
clude	checking, sav	ings, money mark	et, or other financial accounts; ce	rtificates of deposit; sha	res in banks, credit u	nions,
okera No	age houses, pe	nsion funds, coop	peratives, associations, and other (financial institutions.		
	. Fill in the det	ails.				
			Last 4 digits of account number		Date account was	Last balance befo
				instrument	closed, sold, moved, or transferred	closing or transfe
Nan	me of Financial Inst	itution	XXXX	☐ Checking		\$
Nur	mber Street		Name of the second of the seco	☐ Savings		
			_	☐ Money market ☐ Brokerage		
City	у	State ZIP Code		Other		
Nan	me of Financial Insti	tution	XXXX	Checking	<u> </u>	\$
	mber Street		******	Savings Money market		
Atten	nioe: Girear			Brokerage		
Nun				•		
Nun		State ZIP Code	_	Other		

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Bebtor 1 Annette Jo	hnson Hampton		Case number (if known)
First Name	Middle Name	ast Name	The state of the s
2. Have you stored prop	perty in a storage u	it or place other than your home within 1 y	/ear before you filed for bankruptcy?
☑ No ☐ Yes. Fill in the de			
Yes. Fill in the de	tails.	A STATE OF THE STA	
		Who else has or had access to it?	Describe the contents Do you still
			have it?
			□ No
Name of Storage Fa	cility	Name	☐ Yes
	·········		<u> </u>
Number Street		Number Street	
		Cit. State 710 O. J.	
		City State ZIP Code	
City	State ZIP Code		:
Part 9: Identify	Property You Hol	f or Control for Someone Else	
3. Do you hold or cont	rol any property the	someone else owns? Include any propert	y you borrowed from are storing for
or hold in trust for s		, , ,,	y jou bollowda lloin, ale storing tor,
☑ No			
Yes. Fill in the de	etails.		
		Where is the property?	Describe the property Value
		, , ,	
Overage Name		м.	
Owner's Name			\$
Number Street		Number Street	
Number Street			
		_	·
City	State ZIP Code	City State ZIP Code	
-			
Part 10a Give Det	alls About Enviro	mental information	
or the purpose of Part	10, the following de	finitions apply:	
		ate, or local statute or regulation concerni	ing pollution, confamination, solonous of
hazardous or toxic s	ubstances, wastes	or material into the air, land, soil, surface	water, groundwater, or other medium.
including statutes o	r regulations contro	ling the cleanup of these substances, was	tes, or material.
Site means any loca	tion, facility, or pro	erty as defined under any environmental la	w. whether you now own, operate, or
		re it, including disposal sites.	in, modern you now own, operate, or
Hazardous material	means anything an	environmental law defines as a hazardous	wasta hazardoue substance tovic
substance, hazardoi	us material, pollutar	t, contaminant, or similar term.	waste, nazardous substance, toxic
eport all notices, relea	ses, and proceedin	s that you know about, regardless of whe	n they occurred.
4. Has any government	al unit notified you	hat you may be liable or notentially liable a	under or in violation of an environmental law?
🗹 No			
Yes. Fill in the de	itails.		
		Governmental unit Enviro	onmental law, if you know it Date of notice
		Ellalic	onmental law, if you know it Date of notice
Name of site		Governmental unit	
21 4140			
Number Street		Number Street	
***************************************		City State ZIP Code	
Cib.	C4+4+ 710 C+4+		

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tor 1 Annel	tte Johnson Hampton Middle Name	Last Name	Case number (#known)	
7 401 14513	e anoga Nama	Last Name		
	ned any governmental uni	it of any release of hazardous material?		
☑ No ☐ Yes. Fill in	. 4h			
LI 162. FIII III	the details.	Governmental unit	nvironmental law, if you know it	Data at material
		COVERNMENTAL UNIT	invitoring law, it you know it	Date of notice
Name of site	3	Governmental unit		
Number S	itreet	Number Street		
		City State ZIP Code		
City	State ZIP Code	_		
	i a party in any judicial or	administrative proceeding under any er	nvironmental law? Include settlements and	orders.
☑ No ☑ Yes, Fill in	the details.			
- 103, 1111 RI	uie uctans.	Court or agency	Nature of the case	Status of the
		Court of agency	Nature of the case the description of the descriptio	case
Case title		V		Pending
		Court Name		On appeal
Herita		Number Street		Concluded
Case number	er .	City State ZIP Code		
\$57474354034504004				
rt 11A Give	Details About Your B	iusiness or Connections to Any Bu	siness	
Within 4 years	before you filed for bank	ruptcy, did you own a business or have	any of the following connections to any but	siness?
L A sole ∣	proprietor or self-employe	ed in a trade, profession, or other activit empany (LLC) or limited liability partners	y, either full-time or part-time	
A partn	per or a minited hability co her in a partnership	impany (CCC) or limited liability partners	snip (LLP)	
•	· ·	executive of a corporation		
An own	ner of at least 5% of the vo	ting or equity securities of a corporation	n	
_	of the above applies. Go to			
		fill in the details below for each busines	ss.	
		Describe the nature of the business	Employer Identification number	
Business Na	ime		Do not include Social Security i	number or ITIN.
			EIN:	
Number St	reet			
		Name of accountant or bookkeeper	Dates business existed	
			From To	
City	State ZiP Code			
		Describe the nature of the business	Employer Identification number	the state of the s
Business Na	me		Do not include Social Security r	number or ITIN.
			EIN:	
Number St	reet	Name of accountant or bookkeeper	Dates business existed	
***			Pares Musiliess axisted	The state of the s
			From To	
CIA.	04-4- 770 O-1-	_ ·		

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Signature of Debtor Date Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes No Yes Attach the Bankruptcy Petition Preparer's Notice,	1 Annette Johnson Hampton First Name Middle Name Last I	Name Case number	(if known)
Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN EIN:			
Business Name Name of accountant or bookkeeper Dates business existed		· · · · · · · · · · · · · · · · · · ·	
Name of accountant or bookkeeper Dates business existed	Business Name		-
Name of accountant or bookkeeper City State ZIP Code	Number Street		garrana (1788) kan kepada kalifa a minang lagrasang pagalah ang sejar
Iffilin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial stitutions, creditors, or other parties. No Ves. Fill in the details below. Date issued Name Number Street City State ZIP Code This product of Financial Affairs and any attachments, and I declare under penalty of perjury that the newers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauncomecine with a bankruptcy case can result in fines up to \$230,000, or imprisonment for up to 20 years, or both. Signature of Debtor 2 Date Date July Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Ves. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person Attach the Bankruptcy Petition Preparer's Notice, Jess. Name of person		Name of accountant or bookkeeper	Dates business existed
ithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial stitutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code The answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nswers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frau connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Signature of Debtor 2 Date Jake Jake Jake No I No Jess Alach the Bankruptcy Petition Preparer's Notice, Jess Alach of person Alach the Bankruptcy Petition Preparer's Notice, Jess Alach the Bankruptcy Petition Preparer's Notic			From To
No Yes. Fill in the details below. Date issued Name Number Street City State ZIP Code Sign Below Sign Below State Attach the Bankruptcy Petition Preparer's Notice, No Yes. Sim or the details below. Date issued No Date issued No No Date issued No Attach the Bankruptcy Petition Preparer's Notice,	City State ZJP Code	·	
No Yes. Fill in the details below. Date issued			эт этэм эхээх эхээ эхээ эхээ эх эхээ эх эх эх э
Name MM / DD / YYYY Number Street MM / DD / YYYY		tcy, did you give a financial statement to anyone ab	out your business? Include all financial
Number Street Number Street			
Name Name Name Name Number Street City State ZiP Code Sign Below 12: Sign Below 12: Sign Below 13: Sign Below 14: Sign Below 15: Sign Below 16: Sign Below 16: Sign Below 17: Sign Below 18: Sign Below 19: Sign Below 10:	Yes. Fill in the details below.	and the second of the second	
Number Street City State ZIP Code 12: Sign Below have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the newers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauncial connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571. NA Signature of Debtor 1 Date Date id you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Ves. Name of person Attach the Bankruptcy Petition Preparer's Notice,			
Number Street City State ZIP Code 12: Sign Below have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nswers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauncionnection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 3 U.S.C. §§ 152, 1341, 1519, and 3571. N/A Signature of Debtor 1 Date Date Date Id you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Ves No Attach the Bankruptcy Petition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,			
Sign Below have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the newers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frausic connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor! Date Date July 2017 Date July 2017 Date July 2017 July 2019	Name	MM / DD / YYYY	
Sign Below nave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nawers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauncionnection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 3 U.S.C. §§ 152, 1341, 1519, and 3571. NA Signature of Debtor! Date Date Date John John John John John John John John			
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Sign Below nave read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nawer sare true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauncial connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 3 U.S.C. §§ 152, 1341, 1519, and 3571. NA Signature of Debtor 7 Date Date Date Date Hyperition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,			
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have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nawers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauda connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571. N/A Signature of Debtor 1 Date Date Date Date Date Or Prescription or Bankruptcy (Official Form 107)? No Yes No Attach the Bankruptcy Petition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,			
have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the nawers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauda connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571. N/A Signature of Debtor 1 Date Date Date Date Date Or Prescription or Bankruptcy (Official Form 107)? No Yes No Attach the Bankruptcy Petition Preparer's Notice, Attach the Bankruptcy Petition Preparer's Notice,			
newers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frauda connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571. 8 N/A Signature of Debtor 1 Date	129 Sign Below		
Signature of Debtor 2 Date	answers are true and correct. I understand	d that making a false statement, concealing propert	v. or obtaining money or property by fraud
Signature of Debtor 2 Date	K (Assilla Selana Hana	Para Kara	
Date	Signature of Debtor/		
id you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No I Yes I you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No I Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,	at la classe		
No Yes Id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,	777		
Yes id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,	id you attach additional pages to Your St	tatement of Financial Affairs for Individuals Filing fo	or Bankruptcy (Official Form 107)?
id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,			
1 No 2 Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,	J Yes		
1 No 2 Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,	id vou nav or agree to nav someone who	is not an attorney to help you fill out banker store to	rme?
Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,		is not an automey to neip you nill out pankruptcy to	THIS T
Declaration, and Signature (Official Form 119).		Attach	the Bankruptcy Petition Preparer's Notice,

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Fill in this in	iformation to ic	lentify your case:		
Debtor 1		inson Hampton		
	First Name	Middle Name	Last Name	
Debtor 2	N/A			
(Spouse, if filing) First Name	Middle Name	Last Name	***************************************
United States	Bankruptcy Court	for the: Northern District of Ill	inois	
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property
Creditor's name: Wells Fargo Home Mortgage	☐ Surrender the property.	☐ No
Description of 15122 Evers St Dolton IL 60419	Retain the property and redeem it.	Yes
property (debtor's residence) securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]: avoid lie	<u>n</u>
Creditor's name: Midwest Title Loans	☐ Surrender the property.	□ No
manic.	Retain the property and redeem it.	☑ Yes
Description of 2013 Lincoln MKS property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	100
, and the second	Retain the property and [explain]: avoid lie	<u>n</u>
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	_
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
- -	Retain the property and [explain]:	****

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Debtor	1
Deptor	ŧ

Annette Johnson Hampton
First Name Middle Name La

Case number	(If known)
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st Name	Middle Name	Lasi Name

Part 2: List Your Unexpired Personal Property Leases	
For any unexpired personal property lease that you listed in <i>Schedule G: Executor</i> fill in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leasended. You may assume an unexpired personal property lease if the trustee does in the state of the state	ses that are still in effect; the lease period has not yet not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: N/A	□ No
Description of leased property:	☐ Yes
Lessor's name: N/A	□ No
Description of leased property:	☐ Yes

Lessor's name: N/A Description of leased property:	☐ No ☐ Yes
Lessor's name: N/A	□ No
Description of leased property:	Yes
Lessor's name: N/A	□ No
Description of leased property:	Yes
Lessor's name: N/A	□ No
Description of leased property:	Yes
Lessor's name: N/A	☐ No
Description of leased property:	Yes
art 3: Sign Below	

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

* Gunette Johann Harroton	¥ N/A
Signature of Debtor	Signature of Debtor 2
Date 06/26/2017	Date